

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F95000001936 1. Entity Name INLAND AMERICAN WINSTON HOTELS, INC.						FILED 08 AUG -1 AM 10: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2626 GLENWOOD AVE. STE. 200 RALEIGH, NC 27608				Mailing Address 2626 GLENWOOD AVE. STE. 200 RALEIGH, NC 27608			
2. Principal Place of Business - No P.O. Box # 2901 Butterfield Road				3. Mailing Address 2901 Butterfield Road			
Suite, Apt. #, etc. 				Suite, Apt. #, etc. 			
City & State Oak Brook, Illinois				City & State Oak Brook, Illinois			
Zip 60523		Country USA		Zip 60523		Country USA	
4. FEI Number 56-1624289				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WINSTON, CHARLES M 2626 GLENWOOD AVE., STE. 200 RALEIGH, NC 27608 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lori J. Foust 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINSTON, ROBERT W III 2626 GLENWOOD AVE., STE. 200 RALEIGH, NC 27608 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P Brenda G. Gujral 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARDEN, THOMAS F 702 OBERLIN ROAD, #150 RALEIGH, NC 27605 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas P. McGuinness 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORDEN, EDWIN 234 RIDGEWOOD DR. GOLDSBORO, NC 27530 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S Patti Bell 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jim Frey 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Scott W. Wilton 2901 Butterfield Road Oak Brook, IL 60523 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. Scott W. Wilton, Assistant Secretary							
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				7/31/08		(630) 218-8000	