2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F96000002008

1. Entity Name
MICROTEL INNS AND SUITES FRANCHISING, INC.

Principal Place of Business	Mailing Address
13 CORPORATE SQUARE, SUITE 250 ATLANTA, GA 30329	13 CORPORATE SQUARE, SUITE 250 ATLANTA, GA 30329

DO NOT WRITE IN THIS SPACE

01122004 No Chg-P CR2E034 (10/03)

4. FEI Number
58-2195830
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000057554
02/19/04-80065-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	DCEO
NAME	LEVEN, MICHAEL A
STREET ADDRESS	13 CORPORATE SQUARE, STE 250
CITY-ST-ZIP	ATLANTA, GA
TITLE	SVP
NAME	DAYMAN, MARK
STREET ADDRESS	13 CORPORATE SQUARE, STE 250
CITY-ST-ZIP	ATLANTA, GA 30329
TITLE	SVPS
NAME	ARONSON, STEPHEN D
STREET ADDRESS	13 CORPORATE SQUARE, STE 250
CITY-ST-ZIP	ATLANTA, GA 30329
TITLE	D
NAME	LEVEN, MIKE
STREET ADDRESS	13 CORPORATE SQUARE, SUITE 250
CITY-ST-ZIP	ATLANTA, GA 30329
TITLE	D
NAME	GEOGA, DOUGLAS
STREET ADDRESS	200 W MADISON
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: _____ MARK DAYMAN 2/18/04 404-231-1936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #