

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # F96000002008 1. Entity Name MICROTEL INNS AND SUITES FRANCHISING, INC.																																																																																																																													
Principal Place of Business 13 CORPORATE SQUARE, SUITE 250 ATLANTA, GA 30329			Mailing Address 13 CORPORATE SQUARE, SUITE 250 ATLANTA, GA 30329																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																										
City & State			City & State																																																																																																																										
Zip		Country		Zip																																																																																																																									
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 CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																																																																																																																									
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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retaking)																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">DCEO</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>LEVEN, MICHAEL A.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>13 CORPORATE SQUARE, STE 250</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ATLANTA, GA</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SVP</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>DAYMAN, MARK</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>13 CORPORATE SQUARE, STE 250</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ATLANTA, GA 30329</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SVPS</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>FLORA, RAY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>13 CORPORATE SQUARE, STE 250</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ATLANTA, GA 30329</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>LEVEN, MIKE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>13 CORPORATE SQUARE, SUITE 250</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ATLANTA, GA 30329</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>DOUGLAS, GEORGE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>HYATT CENTER, 71 S WACKER</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CHICAGO, IL 60606</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"> 112/02/06-80004-020 150.00 112/02/06-80004-020 150.00 </td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	DCEO	☐ Delete	NAME	LEVEN, MICHAEL A.		STREET ADDRESS	13 CORPORATE SQUARE, STE 250		CITY-ST-ZIP	ATLANTA, GA		TITLE	SVP	☐ Delete	NAME	DAYMAN, MARK		STREET ADDRESS	13 CORPORATE SQUARE, STE 250		CITY-ST-ZIP	ATLANTA, GA 30329		TITLE	SVPS	☐ Delete	NAME	FLORA, RAY		STREET ADDRESS	13 CORPORATE SQUARE, STE 250		CITY-ST-ZIP	ATLANTA, GA 30329		TITLE	D	☐ Delete	NAME	LEVEN, MIKE		STREET ADDRESS	13 CORPORATE SQUARE, SUITE 250		CITY-ST-ZIP	ATLANTA, GA 30329		TITLE	D	☐ Delete	NAME	DOUGLAS, GEORGE		STREET ADDRESS	HYATT CENTER, 71 S WACKER		CITY-ST-ZIP	CHICAGO, IL 60606		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	112/02/06-80004-020 150.00 112/02/06-80004-020 150.00	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	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 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.																																																																																																																													
SIGNATURE: <u>Mark Dayman</u> <u>1/23/06</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																													