


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90045 026 \*\*\*150.00

|  |   |  |  |
|--|---|--|--|
| <b>DOCUMENT # F96000003605</b><br>1. Entity Name<br><b>BOYKIN LODGING COMPANY</b>  |   |   |  |
| Principal Place of Business<br><b>45 W PROSPECT AVE<br/>GUILDHALL BLDG, #1500<br/>CLEVELAND, OH 44115 US</b>   |   | Mailing Address<br><b>45 W PROSPECT AVE<br/>GUILDHALL BLDG, #1500<br/>CLEVELAND, OH 44115 US</b>   |  |
| 2. Principal Place of Business - No P.O. Box #<br><b>5847 San Felipe</b><br>Suite, Apt. #, etc.<br><b>Suite 4650</b>   |   | 3. Mailing Address<br><b>5847 San Felipe</b><br>Suite, Apt. #, etc.<br><b>Suite 4650</b>   |  |
| City & State<br><b>Houston, Tx</b>   |   | City & State<br><b>Houston, Tx</b>   |  |
| Zip<br><b>77075</b>  | Country<br><b>USA</b>   | Zip<br><b>77057</b>  | Country<br><b>USA</b>  |
| 4. FEI Number<br><b>34-1824586</b>   |   | Applied For<br><input type="checkbox"/> Not Applicable   |  |
| 5. Certificate of Status Desired <input type="checkbox"/>  |   | <b>\$8.75 Additional Fee Required</b>  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>C T CORPORATION SYSTEM<br/>1200 SOUTH PINE ISLAND ROAD<br/>PLANTATION, FL 33324</b>  |   | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>   |   |  |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b>  |   | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                      |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | CD<br>BOYKIN, ROBERT W<br>45 W PROSPECT AVE., #1500, GUILDHALL BLDG<br>CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>A. Majid Mangalji<br/>5847 San Felipe Suite 4650<br/>Houston, Tx 77057</b>    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | VS<br>ALEXANDER, ANDREW C<br>45 W PROSPECT AVE #1500 GUILDHALL BLDG<br>CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Fereed Mangalji<br/>5847 San Felipe Suite 4650<br/>Houston, TX 77057</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | P<br>CONTI, RICHARD C<br>45 W PROSPECT AVE., #1500, GUILDHALL BLDG<br>CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Michael Klingher<br/>5847 San Felipe Suite 4650<br/>Houston, Tx 77057</b>     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>ADAMS, ABLERT T<br>1900 E NINTH ST, STE 3200<br>CLEVELAND, OH <input checked="" type="checkbox"/> Delete                         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | Asst Secrtrary/Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Mohamed Thowfeek<br/>5847 San Felipe<br/>Houston, Tx 77057</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>HOWLEY, LEE C<br>30400 DETROIT RD, STE 401<br>WESTLAKE, OH <input checked="" type="checkbox"/> Delete                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | Assit Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Nahid Hamzei<br/>5847 San Felipe<br/>Houston, Tx 77057</b>              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | T<br>JONES, SHEREEN P<br>45 W PROSPECT AVE., #1500, GUILDHALL BLDG<br>CLEVELAND, OH 44115 <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input 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 of 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. |   |  |  |
| <b>SIGNATURE: BOYKIN LODGING COMPANY</b><br><b>By: [Signature] CEO</b>   |   | Date<br><b>4-30-07</b>   | Daytime Phone #<br><b>713.782.9100</b>   |