

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90404 012 ***150.00

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1. Entity Name
INTOWN SUITES MANAGEMENT, INC.



Principal Place of Business

2727 PACES FERRY RD
SUITE II-1200
ATLANTA, GA 30339

Mailing Address

2727 PACES FERRY RD
SUITE II-1200
ATLANTA, GA 30339

50008265



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-1838847

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

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**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

TITLE	P
NAME	WELLS, DOUG
STREET ADDRESS	2727 PACES FERRY RD. SUITE II-1200
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	CFO
NAME	CASSEL, DENNIS
STREET ADDRESS	2727 PACES FERRY RD. SUITE II-1299
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	VP
NAME	GRIFFITH, SCOTT
STREET ADDRESS	2727 PACES FERRY RD. SUITE II-1200
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	CORP SECRETARY
NAME	MIKE WEINSTEIN
STREET ADDRESS	2727 PACES FERRY RD. STE. II-1200
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Mike Weinstein

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CORP. SECRETARY

Date

3-23-06 (770) 799-5218

Daytime Phone #