

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006968

FILED
Jan 23, 2007
Secretary of State

Entity Name: ROCKLEDGE HOTEL PROPERTIES, INC.

Current Principal Place of Business:

6903 ROCKLEDGE DRIVE
1500
BETHESDA, MD 20817 US

New Principal Place of Business:

Current Mailing Address:

6903 ROCKLEDGE DRIVE
1500
BETHESDA, MD 20817 US

New Mailing Address:

FEI Number: 52-2136938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

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.

SIGNATURE: PATRICIA FARRELL

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: LARSON, GREGORY J
Address: 6903 ROCKLEDGE DRIVE, SUITE 1500
City-St-Zip: BETHESDA, MD 20817 US

Title: P () Delete
Name: WALTER, W. EDWARD
Address: 6903 ROCKLEDGE DRIVE, SUITE 1500
City-St-Zip: BETHESDA, MD 20817 US

Title: VP () Delete
Name: HARVEY, LARRY K
Address: 6903 ROCKLEDGE DRIVE, SUITE 1500
City-St-Zip: BETHESDA, MD 20817 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LARSON, GREGORY J
Address: 6903 ROCKLEDGE DRIVE, SUITE 1500
City-St-Zip: BETHESDA, MD 20817 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: CLARK, JEFFREY S
Address: 6903 ROCKLEDGE DRIVE, SUITE 1500
City-St-Zip: BETHESDA, MD 20817 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY J LARSON

VP

01/23/2007

Electronic Signature of Signing Officer or Director

Date