2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000003714

MEISEL HOTEL PROPERTIES, LLC



Principal Place of Business

Mailing Address

6000 EXECUTIVE BLVD. SUITE 700

6000 EXECUTIVE BLVD.

SUITE 700 ROCKVILLE, MD 20852

ROCKVILLE, MD 20852

FILED Mar 19, 2008 08:00 A Secretary of State



01072008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number | | Applied For |
|----------------------------------|-------|----------------|
| 71-0867143 | | Not Appl:cable |
| 5. Certificate of Status Desired | \$5.0 | Additional |

6. Name and Address of Current Registered Agent

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

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| | E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75 | | U00000863240 |
|-----------|--|--|---|
| SIGNATURE | Signature, typed or printed name of registered agent and little if applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE |
| SIGNATURE | | | |
| | ations of registered agent. | anging its registered unite of registered agent, or but | n, in the State of Folica. I am familial with, and accept |

04/03/08-80084-007 138.75

| 9. | MANAGING MEMBERS/MANAGERS | | | |
|---|---------------------------------|--|--|--|
| THILE | MGR | | | |
| NAME | MEISEL, JOEL S | | | |
| STREET ADDRESS | 6000 EXECUTIVE BLVD., SUITE 700 | | | |
| CITY-ST-ZIP | ROCKVILLE, MD 20852 | | | |
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| 11 I hereby cartify that the information cumplied with this filling does not a life for the | | | | |

DO NOT WRITE IN THIS SPACE

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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR ITED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE