

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023534

FILED  
Feb 01, 2004  
Secretary of State

**Entity Name:** WRIGHT HOSPITALITY MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

PO BOX 1057  
MARCO ISLAND, FL 34146

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1057  
MARCO ISLAND, FL 34146

**New Mailing Address:**

FEI Number: 02-0646863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOLD, JOHN A P.A.  
995 NORTH COLLIER BLVD.  
MARCO ISLAND, FL 34145 US

**Name and Address of New Registered Agent:**

WRIGHT, EARLE H  
489 MARQUESAS CT>  
MARCO ISLAND, FL 34145 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: EARLE H. WRIGHT

02/01/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: WRIGHT, DOUGLASS E  
Address: P. O. BOX 1057  
City-St-Zip: MARCO ISLAND, FL 34146 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DOUGLASS E. WRIGHT

MGRM

02/01/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date