2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** May 01, 2006 08:00 Al Secretary of State DOCUMENT # L03000006887 IDH HOSPITALITY, LLC Principal Place of Business Mailing Address 402 HIGHWAY 98 EAST 402 HIGHWAY 98 EAST DESTIN, FL 32541-2326 DESTIN, FL 32541-2326 04112006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 38-3675575 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALTAMURA, JAMES M DO NOT WRITE 404 HIGHWAY 98 EAST DESTIN, FL 32541 IN THIS SPACE 3. 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 life if applicable. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS TITLE MORM NOONAN, CHARLES E NAME STREET ADDRESS 510 GULF SHORE DR #305 CITY-ST-7IP DESTIN, FL 32541 U00000550876 05/13/06-80079-011 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DDE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

11. I hereby certify that the information supplied with this filling 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.