2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018647

Entity Name: CHAFFEE POINT HOSPITALITIES, LLC

FILED Mar 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

319 ROSEDALE PLACE 2100 MIMOSA DRIVE VALDOSTA, GA 31602 VALDOSTA, GA 31602

Current Mailing Address: New Mailing Address:

P.O. BOX 1509 VALDOSTA, GA 31603

FEI Number: 56-2369526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOTLEY, JASON P
11323 PANTHER CREEK COURT

MOTLEY, JASON P
1531 OSCEOLA ST

JACKSONVILLE, FL 32221 US JACKSONVILLE, FL 32204 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: JASON P MOTLEY 03/23/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CHAFFEE POINT HOSPIT, ALITIES, LLC
 Name:

 Address:
 P.O. BOX 1766
 Address:

 City-St-Zip:
 VALDOSTA, GA 31603
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOTLEY, JANÉ P
 Name:

 Address:
 3329 PLANTATION DR.
 Address:

 City-St-Zip:
 VALDOSTA, GA 31605
 City-St-Zip:

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 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: JANE P MOTLEY MGRM 03/23/2006