

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018647

**FILED  
Mar 15, 2011  
Secretary of State**

**Entity Name:** CHAFFEE POINT HOSPITALITIES, LLC

**Current Principal Place of Business:**

548 CHAFFEE POINT BLVD  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1766  
VALDOSTA, GA 31603

**New Mailing Address:**

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

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

MOTLEY, JASON P  
1642 GLENDALE STREET  
JACKSONVILLE, FL 32205 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHAFFEE POINT HOSPITALITIES, LLC  
Address: P.O. BOX 1766  
City-St-Zip: VALDOSTA, GA 31603

Title: MGRM  
Name: MOTLEY, JANE P  
Address: 2100 MIMOSA SR.  
City-St-Zip: VALDOSTA, GA 31602

I hereby 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

03/15/2011

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