

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038462

FILED
May 12, 2006
Secretary of State

Entity Name: TME LODGING, LLC

Current Principal Place of Business:

2295 S HIAWASSEE RD SUITE 307
ORLANDO, FL 32835 US

New Principal Place of Business:

WASSERMAN MEDIA GROUP (ATTN: TIMOTHY HOY)
12100 W. OLYMPIC BLVD., SUITE 400
LOS ANGELES, CA 90071 US

Current Mailing Address:

PO BOX 13667
RESEARCH TRIANGLE PARK, NC 27709

New Mailing Address:

WASSERMAN MEDIA GROUP (ATTN: TIMOTHY HOY)
12100 W. OLYMPIC BLVD., SUITE 400
LOS ANGELES, CA 90071 US

FEI Number: 65-1206985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 S. ORANGE AVE., STE. 1000 (MRH)
ORLANDO, FL 32801 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: MGR () Delete
Name: TME REAL ESTATE, LLC,
Address: 9209 CHARLES E. LIMPUS RD.
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRABOW, ELISSA
Address: 12100 W. OLYMPIC BLVD., SUITE 400
City-St-Zip: LOS ANGELES, CA 90071 US

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: ELISSA GRABOW

MGR

05/12/2006

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