2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Mar 10, 2008 08:00 AM
Secretary of State

1. Entity Name IDS HOSPITALITY LLC



Principal Place of Business

10100 INTERNATIONAL DR. #2001 ORLANDO, FL 32821 Mailing Address

10100 INTERNATIONAL DR. #2001 ORLANDO, FL 32821



01252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2188008 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

FROST, MICHAEL H 10100 INTERNATIONAL DR. #2001 ORLANDO, FL 32821

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8.	. The above named entity submits this statement for the purpose of changing its re	registered office or registered age	nt, or both, in the State of Florida.	I am familiar with, and acce	ρī
	the obligations of registered agent.				
				1-	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when remetating)

, DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000854080 03/26/08-80035-008 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	FROST, MICHAEL H
STREET ADDRESS	10100 INTERNATIONAL DR. #2001
CITY-ST-ZIP	ORLANDO, FL 32821
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	•
TITLE	- · · · ·
NAME	
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CITY-ST-ZIP	
11. I hereby o	certify that the information supplied with this filling does not qualify for the ex

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11. I hereby certify that the information supplied with this filing 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 eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empawered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

2128109

407 352-716

Daytime Phone ii