

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008793

Entity Name: GM HOSPITALITY, LLC

FILED  
Apr 18, 2007  
Secretary of State

## Current Principal Place of Business:

12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110

## New Principal Place of Business:

## Current Mailing Address:

12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110

## New Mailing Address:

FEI Number: 20-2236061

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBISON, STEPHEN V  
12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110 US

## Name and Address of New Registered Agent:

GATES, TODD E  
12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110 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: TODD E. GATES

04/18/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: CRAWFORD, RICHARD S  
Address: 12810 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Delete  
Name: WATCHOWSKI, DALE  
Address: ONE TOWN SQUARE, SUITE 1600  
City-St-Zip: SOUTHFIELD, MI 48076

Title: MGR ( ) Delete  
Name: GATES, TODD E  
Address: 12810 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Delete  
Name: ROBISON, STEPHEN V  
Address: 12810 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34110

Title: MGR (X) Delete  
Name: LODDE, SCOTT R  
Address: 12810 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34110

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: LODDE, SCOTT R  
Address: 12810 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34110

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: TODD E. GATES

MGR

04/18/2007

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