2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# L05000019295

Entity Name: TALLAHASSEE HOTEL JOINT VENTURE, L.L.C.

Current Principal Place of Business:

922 EAST LAFAYETTE STREET
SUITE E
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

922 EAST LAFAYETTE STREET
SUITE E
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-2377113 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, RAKESH K
922 EAST LAFAYETTE STREET
SUITE E
TALLAHASSEE, FL 32301 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	( ) Delete
Name:	PATEL, RAKESH K	
Address:	922 EAST LAFAYETTE STREET, SUITE E	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGRM	( ) Delete
Name:	PATEL, JAYDEV	
Address:	1402 WEST TENNESSEE STREET	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGR	( ) Delete
Name:	MISTRY, PRITI R	
Address:	2801 N. MONROE STREET	
City-St-Zip:	TALLAHASSEE, FL 32304	

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:	

I hereby certify that the information supplied with this filing does not qualify 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: RAKESH K PATEL MGRM 02/23/2009

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