

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081033

FILED
Jun 11, 2007
Secretary of State

Entity Name: PALMETTO HOSPITALITY OF GAINESVILLE I, LLC

Current Principal Place of Business:

961 EAST MAIN STREET
SPARTANBURG, SC 29302

New Principal Place of Business:

340 EAST MAIN STREET
SUITE 300
SPARTANBURG, SC 29302

Current Mailing Address:

961 EAST MAIN STREET
SPARTANBURG, SC 29302

New Mailing Address:

340 EAST MAIN STREET
SUITE 300
SPARTANBURG, SC 29302

FEI Number: 20-3286253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PALMETTO HOSPITALITY, GM, LLC
Address: 961 EAST MAIN STREET
City-St-Zip: SPARTANBURG, SC 29302

Title: MGRM (X) Delete
Name: JOHNSON, GEORGE D JR
Address: 961 EAST MAIN STREET
City-St-Zip: SPARTANBURG, SC 29302

Title: MGRM (X) Delete
Name: OAKES, CORRY W III
Address: 961 EAST MAIN STREET
City-St-Zip: SPARTANBURG, SC 29302

Title: MGRM (X) Delete
Name: HUIZENG, INVESTMENTS L
Address: 450 E. LAS OLAS BLVD, SUITE 1500
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGRM (X) Delete
Name: OVENDEN, JAMES A
Address: 961 EAST MAIN STREET
City-St-Zip: SPARTANBURG, SC 29302

Title: MGRM (X) Delete
Name: TURNER, TODD R
Address: 961 EAST MAIN STREET
City-St-Zip: SPARTANBURG, SC 29302

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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: DAN C. BREEDEN, JR.

PRES

06/11/2007

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