

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081929

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: SURYA HOSPITALITY, LLC

**Current Principal Place of Business:**

3001 UNIVERSITY CENTER DR.  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

3001 UNIVERSITY CENTER DR.  
TAMPA, FL 33612

**New Mailing Address:**

FEI Number: 20-3332676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

NELSON, G. MICHAEL  
718 W. MLK BLVD.  
TAMPA, FL 33603 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, DILIP M  
Address: 10720 CORY LAKE DR  
City-St-Zip: TAMPA, FL 33647

Title: MGRM ( ) Delete  
Name: PATEL, BHARAT  
Address: 3001 UNIVERSITY CENTER DR.  
City-St-Zip: TAMPA, FL 33612

Title: MGRM ( ) Delete  
Name: PATEL, MUKUND  
Address: 4338 CONROY CLUB DR.  
City-St-Zip: ORLANDO, FL 32835

Title: MGRM ( ) Delete  
Name: PATEL, KETAN  
Address: 3001 UNIVERSITY CENTER DR.  
City-St-Zip: TAMPA, FL 33612

Title: MGRM ( ) Delete  
Name: PATEL, INDRAVANADAN  
Address: 3001 UNIVERSITY CENTER DR.  
City-St-Zip: TAMPA, FL 33612

Title: MGRM ( ) Delete  
Name: PATEL, BHOGILAL  
Address: 3001 UNIVERSITY CENTER DR.  
City-St-Zip: TAMPA, FL 33612

**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: ( ) 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: DILIP M PATEL

GM

01/07/2008

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