

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070311

Entity Name: S & M HOSPITALITY, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

% HAMPTON INN
4420 N. SOCRUM LOOP RD.
LAKELAND, FL 33809

New Principal Place of Business:

3520 HIGHWAY 98 NORTH
LAKELAND, FL 33809

Current Mailing Address:

% HAMPTON INN
4420 N. SOCRUM LOOP RD.
LAKELAND, FL 33809

New Mailing Address:

3520 HIGHWAY 98 NORTH
LAKELAND, FL 33809

FEI Number: 20-5356079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

PATEL, MAHESH D
4420 N. SOCRUM LOOP RD.
LAKELAND, FL 33809 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, SONMUCHLAL L
Address: 7573 FAIRLINK COURT E.
City-St-Zip: SARASOTA, FL 34243

Title: MGRM () Delete
Name: PATEL, RAMILA S
Address: 7573 FAIRLINK COURT E.
City-St-Zip: SARASOTA, FL 34243

Title: MGRM () Delete
Name: PATEL, MAHENDRA A
Address: 20 RIO VISTA RD.
City-St-Zip: ARCADIA, FL 34266

Title: MGRM () Delete
Name: PATEL, RITA M
Address: 20 RIO VISTA RD.
City-St-Zip: ARCADIA, FL 34266

Title: MGRM () Delete
Name: NAGAR, MANU
Address: 5000 N. TAMiami TR.
City-St-Zip: SARASOTA, FL 34234

Title: MGRM () Delete
Name: PATEL, MAHESH D
Address: 4009 STAFFORDSHIRE DR.
City-St-Zip: LAKELAND, FL 33809

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: MGRM (X) Change () Addition
Name: NAGAR, MANU
Address: 3783 ROLLINGSFORD CIRCLE
City-St-Zip: LAKELAND, FL 33810

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: MANU NAGAR

MGRM

05/01/2007

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