2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # £95000000938

t. Entity Name
HOTEL VENTURE, L.C.



FILED Apr 17, 2006 08:00 AM Secretary of State

Principal Place of Business

TAMPA, FL 33629

2910 W. BAY TO BAY BLVD. SUITE 200 Mailing Address

2910 W. BAY TO BAY BLVD. SUITE 200

TAMPA, FL 33629



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04042006 Na Chg-LLC

CR2E083 (11/05)

4. FEI Number ; 59-3352574

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FROST, MICHAEL H 2910 W. BAY TO BAY BLVD. SUITE 200 TAMPA, FL 33629

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5,	The above named entity submits this statement for the purpose of changing its registered office	e of registered agent, or c	ioth' iu tue :	State of Florida.	t am temilier with, and	accept
	the obligations of registered agent.		4	1.4		

SIGNATURE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP
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NAME
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CITY-ST-ZIP

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2006

U00000516204 04/29/06-80239-016 50.00

#### 9, MANAGING MEMBERS/MANAGERS TITLE MGR LSF CORPORATION NAME 2910 W. BAY TO BAY BLVD., STE. 200 STREET ADDRESS **TAMPA, FL 33629** CITY-SI-ZIP TITLE NAME STREET ACCRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under odth; 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:

michael Fa

4/14/06

(813)221-752