

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000615

Entity Name: SSM HOSPITALITY, LLC

FILED
Jul 06, 2006
Secretary of State

Current Principal Place of Business:

1026 APALACHEE PARKWAY
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1026 APALACHEE PARKWAY
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3513496 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:

Name and Address of New Registered Agent:

PATEL, SUDHIR
1026 APALACHEE PARKWAY
TALLAHASSEE, FL 32301 US

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, SUDHIR
Address: 1026 APALACHEE PARKWAY
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM () Delete
Name: MASTER, THAKOR
Address: 251 NORTH OATES STREET
City-St-Zip: DOTHAN, AL 36303

Title: MGRM () Delete
Name: PATEL, SAILESH
Address: 13212 WHITE CEDAR COURT
City-St-Zip: ORLANDO, FL 32828

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 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: SUDHIR PATEL

MGRM

07/06/2006

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