## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M00000002581

Entity Name: LAUDERDALE PARTNERS, LLC

332 WASHINGTON STREET, SUITE 204

GAINESVILLE, GA 30501 US

Address:

City-St-Zip:

FILED Mar 28, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 332 WASHINGTON STREET SUITE 204 GAINESVILLE, GA 30501 **Current Mailing Address: New Mailing Address:** 332 WASHINGTON STREET SUITE 204 GAINESVILLE, GA 30501 FEI Number: 58-2581906 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHAW III, E. CLAY 912 EAST BROWARD BLVD., STE B FT LAUDERDALE, FL 33301 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: ADDITIONS/CHANGES: ( ) Delete Title: () Change () Addition REGIONS HOSPITALITY,, LLC Name: Name: Address: 332 WASHINGTON STREET NW, STE 204 Address: City-St-Zip: GAINESVILLE, GA 30501 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MERCER, BRETT Name: Address: 332 WASHINGTON STREET, SUITE 204 Address: City-St-Zip: GAINESVILLE, GA 30501 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PARKER, BEN Name: Name: 332 WASHINGTON STREET, SUITE 204 Address: Address: City-St-Zip: GAINESVILLE, GA 30501 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: MERCER, DAVID Name:

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.

Address:

City-St-Zip:

SIGNATURE: BRETT MERCER MGR 03/28/2007