

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000000222

**FILED**  
**Mar 12, 2004**  
**Secretary of State**

**Entity Name:** ARDEN HOTELS LLC

**Current Principal Place of Business:**

425 OCEAN DRIVE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

THE ARDEN GROUP, 121 S BROAD ST, 13TH FL  
PHILADELPHIA, PA 19107

**New Mailing Address:**

THE ARDEN GROUP, 1635 MARKET STREET  
17TH FLOOR  
PHILADELPHIA, PA 19103

**FEI Number:** 28-3073672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SPENCER, CRAIG A  
Address: 121 S BROAD STREET 13TH FLOOR  
City-St-Zip: PHILADELPHIA, PA 19107

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SPENCER, CRAIG A  
Address: 1635 MARKET STREET, 17TH FLOOR  
City-St-Zip: PHILADELPHIA, PA 19103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CRAIG A. SPENCER

MGRM

03/12/2004

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