


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000000627 1. Entity Name ASHFORD OP. GENERAL PARTNER LLC	
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Principal Place of Business 14180 DALLAS PARKWAY, SUITE 700 DALLAS, TX 75254	Mailing Address 14180 DALLAS PARKWAY, SUITE 700 DALLAS, TX 75254
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0111035	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

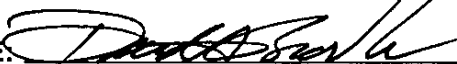
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASHFORD HOSPITALITY TRUST, INC. 14180 DALLAS PARKWAY, SUITE 700 DALLAS, TX 75254
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01/31/07-80028-023 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 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 	David A. Brooks	1/26/07	972-490-9600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date	Daytime Phone #