

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002386

**FILED**  
**Feb 18, 2012**  
**Secretary of State**

**Entity Name:** CARDEL HOSPITALITY, LLC

**Current Principal Place of Business:**

C/O DRIFTWOOD HOSPITALITY MANAGEMENT LLC  
11780 N US HIGHWAY 1, SUITE 400  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

C/O DRIFTWOOD HOSPITALITY MANAGEMENT LLC  
11770 N US HIGHWAY 1, SUITE 202  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

C/O DRIFTWOOD HOSPITALITY MANAGEMENT LLC  
11780 N US HIGHWAY 1, SUITE 400  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

C/O DRIFTWOOD HOSPITALITY MANAGEMENT LLC  
11770 N US HIGHWAY 1, SUITE 202  
NORTH PALM BEACH, FL 33408

**FEI Number:** 20-5093452

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEISSLER, ROBERT I  
2200 MUSEUM TOWER  
150 WEST FLAGLER STREET  
MIAMI, FL 33130 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/MANAGERS:**

**Title:** MGRM  
**Name:** DRIFTWOOD HOSPITALITY MANAGEMENT, LLC  
**Address:** 11770 N US HIGHWAY 1, SUITE 202  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

I hereby 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:** DAVID BUDDMEYER

VP

02/18/2012

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