

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003464

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Entity Name:** APMC HOTEL MANAGEMENT, LLC

**Current Principal Place of Business:**

8910 UNIVERSITY CENTER LANE, SUITE 500  
SAN DIEGO, CA 92122

**New Principal Place of Business:**

8910 UNIVERSITY CENTER LANE, SUITE 100  
SAN DIEGO, CA 92122

**Current Mailing Address:**

8910 UNIVERSITY CENTER LANE, SUITE 500  
SAN DIEGO, CA 92122

**New Mailing Address:**

8910 UNIVERSITY CENTER LANE, SUITE 100  
SAN DIEGO, CA 92122

**FEI Number:** 05-0588714

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: MGR ( ) Delete  
Name: GALLEGOS, MICHAEL S  
Address: 8910 UNIVERSITY CENTER LANE, SUITE 500  
City-St-Zip: SAN DIEGO, CA 92122

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GALLEGOS, MICHAEL S  
Address: 8910 UNIVERSITY CENTER LANE, SUITE 100  
City-St-Zip: SAN DIEGO, CA 92122

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:** MICHAEL S. GALLEGOS

MGR

04/28/2006

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