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FILED
Jun 13, 2008 8:00 am
Secretary of State

05-07-2008 90022 021 ***138.75

**2008 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # M06000000965			
1. Entity Name CAMPUS LODGE ACQUISITIONS, LLC			
Principal Place of Business 225 S. LAKE AVE., SUITE 630 PASADENA, CA 91101		Mailing Address 225 S. LAKE AVE., SUITE 630 PASADENA, CA 91101	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
- City & State -		City & State	
Zip	Country	Zip	Country
5. Name and Address of Current Registered Agent PACIFIC REGISTERED AGENTS, INC. 82 SADBERRY ROAD QUINCY, FL 32351		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 Signature, typed or printed name of registered agent and (if a licensee) LICENSE Registered Agent signature required when re-appointing DATE			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MTRM GRAHAM-BERGIN, ANNE 2205 E. SPEEDWAY TUCSON, AZ 85719 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM McCarthy, Luke 225 S. Lake Avenue #1030 Pasadena, CA 91101 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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 606, Florida Statutes.			
SIGNATURE: <i>John V. H. C.</i>		April 30, 2008 800-990-8448	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone	

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02042008 Chg-LLC CR2E083 (12/06)

4. FEI Number
APR 13 2008 20-3792012 Applied For
Not Applicable5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required