

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M06000001521

1. Entity Name
JACKSONVILLE HOTEL ASSOCIATES LLC



FILED
08 AUG -1 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2626 GLENWOOD AVE. SUITE 200
RALEIGH, NC 27608

Mailing Address
2626 GLENWOOD AVE. SUITE 200
RALEIGH, NC 27608

2. Principal Place of Business - No P.O. Box #
2901 Butterfield Road

3. Mailing Address
2901 Butterfield Road



07222008 Chg-LLC CR2E083 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Oak Brook, Illinois

City & State
Oak Brook, Illinois

4. FEI Number
20-5120321

Applied For
Not Applicable

Zip
60523

Country
USA

Zip
60523

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

BK

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$538.75
Due by September 12, 2008**

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☒ Delete
NAME WINN LIMITED PARTNERSHIP
STREET ADDRESS 2626 GLENWOOD AVE. SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ~~MGR~~ ☒ Change ☐ Addition
NAME WINN LIMITED PARTNERSHIP
STREET ADDRESS 2901 BUTTERFIELD ROAD
CITY-ST-ZIP OAK BROOK, IL 60523

TITLE ☐ Change ☐ Addition
NAME 500134017295
STREET ADDRESS 08/06/08--01009--011 **\$38.75
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

Scott W. Wilton, Assistant Secretary of Inland American Winston Hotels, Inc., a DE corp., general partner of WINN Limited Partnership, a NC LP, sole member of the LLC

SIGNATURE:

[Signature]

7/30/08

(630) 218-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #