

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90020 031 ***138.75

DOCUMENT # M06000004112

1. Entity Name
LQ FT. MYERS L.L.C.



Principal Place of Business
C/O LA QUINTA CORPORATION
909 HIDDEN RIDGE, SUITE 600
IRVING, TX 75038

Mailing Address
C/O LA QUINTA CORPORATION
909 HIDDEN RIDGE, SUITE 600
IRVING, TX 75038

60040020



04222008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5236253

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331

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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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LODGE BORROWER III L.L.C.
345 PARK AVENUE
NEW YORK, NY 10154

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: _____

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

Mark M. Chlopek - V.P.

Date

4/25/08

Daytime Phone #

(214) 492-6600