## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # M07000004962

1. Entity Name

RLJ II - HA FORT WALTON BEACH LESSEE, LLC



Principal Place of Business

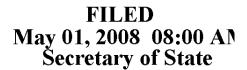
SIGNATURE:

SIGNATURE AND HEED OR PRINTED NAME OF SIGNIS

Mailing Address

3 BETHESDA METRO CENTER, SUITE 1000 BETHESDA, MD 20814

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DO NOT WRITE IN THIS SPACE

04222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 26-0591895 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

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chair tions of registered agent.	nging its registered office or registered agent, or both, i	n the State of Florida II am familiar with, and accept
SIGNATURE	Signature, typed or conted name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STRELT ADDRESS CITY-ST-ZIP	MGRM RLJ LODGING II REIT SUB, INC. 3 BETHESDA METRO CENTER, SUITE 1000 BETHESDA, MD 20814		U00000941800
TITLE NAME STREET ADDRESS CITY-ST-ZIP			05/28/08-80121-005 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TI	HIS SPACE
TITLE NAME STREET ADDRESS CITY-S1-ZIP			Rassin
NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filling 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.

G MANAGING MEMBER, OR AUTHORIZED REPR