

2001 UNIFORM BUSINESS REPORT (UBR)

0027156 AF

DOCUMENT # M97000000012

1. Entity Name
MHI HOTELS, L.L.C.

FILED

01 FEB -5 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
814 CAPITOL LANDING ROAD
WILLIAMSBURG VA 23185

Mailing Address
6411 IVY LANE, SUITE 512
GREENBELT MD 20770

2. Principal Place of Business

3. Mailing Address

6411 IVY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 510

City & State

City & State

GREENBELT MD

Zip

Country

Zip

Country

20770

USA

4. FEI Number 52-1962873

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

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 \$50.00
Make Check Payable to Department of State

300003672979--7
-02/09/01--01096--017
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME SIMS, ANDREW M
STREET ADDRESS 814 CAPITOL LANDING ROAD
CITY-ST-ZIP WILLIAMSBURG FL 23185

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEM
NAME ZAISER, WILLIAM
STREET ADDRESS 6411 IVY LANE, #512
CITY-ST-ZIP GREENBELT MD 20770

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEM
NAME SIMS, KIM
STREET ADDRESS 6411 IVY LANE, #512
CITY-ST-ZIP GREENBELT MD 20770

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEM
NAME SIMS, KIM
STREET ADDRESS 6411 IVY LAND, #512
CITY-ST-ZIP GREENBELT MD 20770

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEM
NAME BLACK, JOHN
STREET ADDRESS 6411 IVY LANE, #512
CITY-ST-ZIP GREENBELT MD 20770

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEM
NAME SMITH, STEVEN
STREET ADDRESS 6411 IVY LANE, #512
CITY-ST-ZIP GREENBELT MD 20770

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/31/01

301-474-3307

CR2E083 (11/00)