

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 21, 2004 8:00 am
Secretary of State

09-21-2004 90039 042 ****50.00

DOCUMENT # M98000000004

1. Entity Name
WOODFIN SUITE HOTELS, L.L.C.



Principal Place of Business

12730 HIGH BLUFF DRIVE
SUITE 250
SAN DIEGO, CA 92130

Mailing Address

12730 HIGH BLUFF DRIVE
SUITE 250
SAN DIEGO, CA 92130

24085759



05172004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-0777701

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARINICH, DAVID
3075 N. ROCKY POINT DRIVE
TAMPA, FL 33607

**DO NOT WRITE
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 _____

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HARDAGE, SAMUEL A
STREET ADDRESS	12730 HIGH BLUFF DRIVE, SUITE 250
CITY-ST-ZIP	SAN DIEGO, CA 92130

TITLE	
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IN THIS SPACE**

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.

August 27, 2004

Samuel A. Hardage, Managing Member (858) 794-2338

SIGNATURE: _____

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

Date

Daytime Phone #