

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2006 8:00 am**  
**Secretary of State**

01-31-2006 90026 022 \*\*\*\*55.00

**DOCUMENT # M98000000010**

1. Entity Name  
**STRATEGIC HOTEL FUNDING, L.L.C.**



Principal Place of Business  
**77 WEST WACKER DRIVE, SUITE 4600  
CHICAGO, IL 60601**

Mailing Address  
**ATTN: GENERAL COUNSEL  
77 WEST WACKER, SUITE 4600  
CHICAGO, IL 60601**

**20004229**



01112006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**36-4200430**

Applied For  
Not Applicable

5. Certificate of Status Desired

**X** **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**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 May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
STRATEGIE HOTEL CAPITAL, INC.  
77 WEST WACKER DRIVE, SUITE 4600  
CHICAGO, IL 60601**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:**

*Paula C. Maggini*

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

*1/31/06 (312) 958-5000*  
Date Daytime Phone #



STRATEGIC

ATTACHMENT

20004229

January 27, 2006

VIA FEDERAL EXPRESS

Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee, FL 32301

Re: 2005 Limited Liability Company Annual Report for:  
Strategic Hotel Funding, L.L.C. (Document # M98000000010)

To Whom It May Concern:

I have attached an executed original copy of a 2005 Limited Liability Company Annual Report along with a check in the amount of Fifty Five Dollars (\$55.00) which represents payment of the Annual Report and Certificate of Status fee for Strategic Hotel Capital, L.L.C. (Document # M99000001224)

If you have any questions regarding the enclosed, or if I can be of any further assistance, please contact me at (312) 658-5018 or by e-mail at [ncochand@strategichotels.com](mailto:ncochand@strategichotels.com).

Very truly yours,

Nancy Cochand  
Senior Paralegal

cc: Paula Maggio

STRATEGIC  
HOTELS & RESORTS

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