

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90065 016 \*\*\*138.75

**DOCUMENT # M99000000007**

1. Entity Name  
CCMH COURTYARD I LLC



Principal Place of Business

8405 GREENSBORO DRIVE,  
SUITE 500-ABF  
MCLEAN, VA 22102

Mailing Address

8405 GREENSBORO DRIVE  
SUITE 500-ABF  
MCLEAN, VA 22102

00000001



01092008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 52-2151967	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

**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 \_\_\_\_\_

**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	MGR DURBIN, DAVID L 8405 GREENSBORO DRIVE, SUITE 500 MCLEAN, VA 22102
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DONAHUE, PIERRE 8405 GREENSBORO DRIVE, SUITE 500 MCLEAN, VA 22102
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WARDINSKI, BRUCE D 8405 GREENSBORO DRIVE, SUITE 500 MCLEAN, VA 22102
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
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

1-22-08

Date

571-382-1718

Daytime Phone #