

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105757

Entity Name: ALLIANCE HOTEL GROUP INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110

New Principal Place of Business:

17170 HARBOUR POINTE DRIVE #835
FORT MYERS, FL 33908

Current Mailing Address:

12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110

New Mailing Address:

17170 HARBOUR POINTE DRIVE #835
FORT MYERS, FL 33908

FEI Number: 20-3226240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LODDE, SCOTT R
12810 TAMIAMI TRAIL NORTH
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

LODDE, SCOTT R
17170 HARBOUR POINTE DRIVE #835
FORT MYERS, FL 33908 US

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:

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: LODDE, SCOTT R
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

Title: S/D () Delete
Name: LODDE, MARY ANN
Address: 12810 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: LODDE, SCOTT R
Address: 17170 HARBOUR POINTE DRIVE #835
City-St-Zip: FORT MYERS, FL 33908

Title: S/D (X) Change () Addition
Name: LODDE, MARY ANN
Address: 17170 HARBOUR POINTE DRIVE #835
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT R. LODDE

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date