2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002552

Entity Name: HQ SUITES, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6817 SOUTHPOINT PARKWAY 6817 SOUTHPOINT PARKWAY

SUITE 503 SUITE 503

JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

6817 SOUTHPOINT PARKWAY 6817 SOUTHPOINT PARKWAY

SUITE 503

JACKSONVILLE, FL 32258

SUITE 503

JACKSONVILLE, FL 32216

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUSER, AARON J HOUSER, AARON J

6151 WAKULLA SPRINGS RD 6817 SOUTHPOINT PARKWAY, SUITE 503

JACKSONVILLE, FL 32258 US JACKSONVILLE, FL 32216 ÚS

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: AARON J. HOUSER 05/02/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD () Delete Title: MD (X) Change () Addition

Name: HOUSER, AARON J Name: HOUSER, AARON J

Address: 6151 WAKULLA SPRINGS RD Address: 6817 SOUTHPOINT PARKWAY, SUITE 503

City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify 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: AARON J. HOUSER MD 05/02/2007

Electronic Signature of Signing Officer or Director

Date