



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2008

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 104225		2. Exact name of the limited liability company CCMH Courtyard I LLC	
3. State of Formation Delaware		4. Brief description of the character of the business which is actually conducted in Rhode Island Hotel Management	
5. Principal office address 8405 Greensboro Drive, #500		City McLean	State 22102
		Zip 22102	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Pierre M. Donahue		Contact Title	
Street Address 8405 Greensboro Drive, #500		City McLean	State VA
		Zip 22102	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐			
Manager Name David L. Durbin		Manager Name Pierre M. Donahue	
Street Address 8405 Greensboro Drive, #500		Street Address 8405 Greensboro Drive, #500	
City McLean	State VA	City McLean	State VA
Zip 22102		Zip 22102	
Manager Name Bruce D. Wardinski		Manager Name	
Street Address 8405 Greensboro Drive, #500		Street Address	
City McLean	State VA	City	State
Zip 22102		Zip	
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name Prentice-Hall Corp. System		Address	
Address 222 Jefferson Boulevard, Suite 200		City Warwick	Zip 02888

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

104225

File Date	FILED
Check No.	SEP 17 2008
By	34511
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person  Date 9-4-08
Pierre M. Donahue
Print or Type Name of Authorized Person