

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004069

FILED  
May 04, 2006  
Secretary of State

**Entity Name:** EAGLE HOSPITALITY PROPERTIES TRUST, INC.

**Current Principal Place of Business:**

100 E. RIVERCENTER BLVD STE. 480  
COVINGTON, KY 41011

**New Principal Place of Business:**

**Current Mailing Address:**

100 E. RIVERCENTER BLVD STE. 480  
COVINGTON, KY 41011

**New Mailing Address:**

**FEI Number:** 55-0862656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATIONAL CORPORATE RESEARCH, LTD. INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: BLACKHAM, J. WILLIAM  
Address: 100 E. RIVERCENTER BLVD STE. 480  
City-St-Zip: COVINGTON, KY 41011

Title: ST ( ) Delete  
Name: MARTZ, RAYMOND D  
Address: 100 E. RIVERCENTER BLVD STE. 480  
City-St-Zip: COVINGTON, KY 41011

Title: V ( ) Delete  
Name: GUERNIER, BRIAN  
Address: 100 E. RIVERCENTER BLVD STE. 480  
City-St-Zip: COVINGTON, KY 41011

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** RAYMOND D. MARTZ

ST

05/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date