2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# M04000002198

Entity Name: BABSON CAPITAL MANAGEMENT LLC

Current Principal Place of Business:

470 ATLANTIC AVENUE
BOSTON, MA 02210 US

New Principal Place of Business:

Current Mailing Address:

470 ATLANTIC AVENUE
BOSTON, MA 02210 US

New Mailing Address:

FEI Number: 51-0504477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	MICHAEL, ROLLINGS T	
Address:	1295 STATE STREET	
City-St-Zip:	SPRINGFIELD, MA 01111 US	
Title:	MGR	( ) Delete
Name:	CRANDALL, ROGER W	
Address:	1500 MAIN STREET	
City-St-Zip:	SPRINGFIELD, MA 01115 US	
Title:	MGR	( ) Delete
Name:	NOREEN, CLIFFORD M	
Address:	1500 MAIN STREET	
City-St-Zip:	SPRINGFIELD, MA 01115 US	
Title:	MGR	( ) Delete
Name:	FINKE, THOMAS M	
Address:	201 SOUTH COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28244 US	
Title:	MGR	( ) Delete
Name:	BRENNAN, DAVID J	
Address:	155 BISHOPSGATE	
City-St-Zip:	LONDON, UK EC2M3XY UK	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CLIFFORD M. NOREEN MR. 04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date