2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003615

Entity Name: BVT DEVELOPMENT CORPORATION II

FILED Jul 10, 2008 Secretary of State

3350 RIVERWOOD PARKWAY, SUITE 1500 400 INTERSTATE NORTH PARKWAY ATLANTA, GA 30339

SUITE 700

ATLANTA, GA 30339

Current Mailing Address: New Mailing Address:

3350 RIVERWOOD PARKWAY, SUITE 1500 400 INTERSTATE NORTH PARKWAY ATLANTA, GA 30339

SUITE 700

ATLANTA, GA 30339

FEI Number: 59-2554692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

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

3350 RIVERWOOD PKWY, STE 1500

ATLANTA, GA 30339

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

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:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

DUERR, CHRISTIAN Name: Name: DUERR, CHRISTIAN

3350 RIVERWOOD PARKWAY, SUITE 1500 400 INTERSTATE NORTH PARKWAY SUITE 700 Address: Address:

ATLANTA, GA 30339 City-St-Zip: City-St-Zip: ATLANTA, GA 30339

VΡ Title: VΡ Title: () Delete (X) Change () Addition Name: SAUER, MICHAEL Name:

SAUER, MICHAEL

3350 RIVERWOOD PARKWAY, SUITE 1500 400 INTERSTATE NORTH PARKWAY SUITE 700 Address: Address:

ATLANTA, GA 30339 City-St-Zip: City-St-Zip: ATLANTA, GA 30339

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

GARNER, BRAD WEAVER, MICHAEL S Name: Name:

3350 RIVERWOOD PARKWAY, SUITE 1500 400 INTERSTATE NORTH PARKWAY SUITE 700 Address: Address:

City-St-Zip: ATLANTA, GA 30339 City-St-Zip: ATLANTA, GA 30339

Title: TREA (X) Delete Title: () Change () Addition WEAVER, MICHAEL S

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 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: M. SCOTT WEAVER **CFO** 07/10/2008