2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001753

Entity Name: SABA HOLDING COMPANY II

FILED Jun 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE VOLVO DRIVE 11425 REAMES ROAD ASHEVILLE, NC 288033447 CHARLOTTE, NC 28269 US **Current Mailing Address: New Mailing Address:** ONE VOLVO DRIVE 11425 REAMES ROAD ASHEVILLE, NC 288033447 CHARLOTTE, NC 28269 US FEI Number: 56-2329150 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition OLNEY, PATRICK Name: Name: ONE VOLVO DRIVE Address: Address: City-St-Zip: ASHEVILLE, NC 288033447 City-St-Zip: VST Title: Title: () Delete () Change () Addition Name: GOING, MICHAEL P Name: ONE VOLVO DRIVE Address: Address: ASHEVILLE, NC 288033447 City-St-Zip: City-St-Zip: Title: Title: () Delete RPS () Change (X) Addition CUMMINS, G W Name: Name: 11425 REAMES ROAD Address Address: City-St-Zip: City-St-Zip: CHARLOTTE, NC 28269 Title: () Delete Title: CFO () Change (X) Addition TORRINGTON, PAUL Name: Name: Address: Address: 400 AIRPORT ROAD City-St-Zip: City-St-Zip: **ARDEN, NC 28704** Title: Title: () Change (X) Addition () Delete SMITH, BRYAN Name: Name: Address: Address: 400 AIRPORT ROAD City-St-Zip: City-St-Zip: **ARDEN, NC 28704** Title: () Delete Title: ASEC () Change (X) Addition SHERWOOD, RYAN Name: Name: Address: Address: 2020 STATE ROAD City-St-Zip: City-St-Zip: CAMP HILL, PA 17011

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RYAN SHERWOOD ASEC 06/01/2004