2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002295

Entity Name: ESA 2005 OPERATING LESSEE INC.

FILED Apr 21, 2008 Secretary of State

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Current Pri	incipal Place	of Business:	New Princ	New Principal Place of Business:		
100 DUNBAR ST SPARTANBURG, SC 29306						
Current Mailing Address:			New Mailing Address:			
100 DUNBAR ST. TAX DEPT. SPARTANBURG, SC 29306						
FEI Number:	20-2628471	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificat	e of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					stered Agent:	
NRAI SERVIES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 US						
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 DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VD () GRAY, JONATH 345 PARK AVE NEW YORK, N	NUE	Title: Name: Address: City-St-Zip:	PD (X) Change (LICHTENSTEIN, DAVID 326 THIRD ST LAKEWOOD, NJ 08701) Addition	
Title: Name: Address: City-St-Zip:	VD () STEIN, WILLIA 345 PARK AVE NEW YORK, N	NUE	Title: Name: Address: City-St-Zip:	S (X) Change (TEICHMAN, JOSEPH 326 THIRD ST LAKEWOOD, NJ 08701) Addition	
Title: Name: Address: City-St-Zip:	VSTD () MCDONAGH, D 345 PARK AVE NEW YORK, N	NUE	Title: Name: Address: City-St-Zip:	AS (X) Change (ROGERS, F JOSEPH 100 DUNBAR ST SPARTANBURG, SC 2930		
Title: Name: Address: City-St-Zip:	VD (X SUMERS, GAR 345 PARK AVE NEW YORK, N	NUE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	AS (X ROGERS, F. JO 100 DUNBAR S SPARTANBURO	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: F JOSEPH ROGERS AS 04/21/2008