2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # M02000002182

1. Entity Name
EA-BSB 2, L.L.C.

Principal Place of Business	Mailing Address
1901 MAIN STREET, STE. 900 COLUMBIA, SC 29201	1901 MAIN STREET, STE. 900 COLUMBIA, SC 29201

04192005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2054342
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

U00000344050
04/29/05-80120-024 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LUMPKIN, JOHN H
STREET ADDRESS	1901 MAIN STREET, STE. 900
CITY-ST-ZIP	COLUMBIA, SC 29201
TITLE	MGRM
NAME	MCLEAN, JODIE W
STREET ADDRESS	1901 MAIN STREET, STE. 900
CITY-ST-ZIP	COLUMBIA, SC 29201
TITLE	MGRM
NAME	TILLMAN, CARRIE L
STREET ADDRESS	103 FOULK ROAD, STE. 200
CITY-ST-ZIP	WILMINGTON, DE 19803
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Jay P. Matera JAY P. MATERA 4/21/05 803-779-4420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #