## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M0400005258

Entity Name: SCP 2004E-518 LLC

FILED Apr 14, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P O BOX 66 995 MAIN ROAD WEST NEWTON, MA 02465 11VERTON, RI 02878

Current Mailing Address: New Mailing Address:

P O BOX 66 995 MAIN ROAD WEST NEWTON, MA 02465 11VERTON, RI 02878

FEI Number: 04-3172764 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 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

Electronic dignature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 KIRKER CREEK CORP,
 Name:

 Address:
 P O BOX 66
 Address:

 City-St-Zip:
 WEST NEWTON, MA 02465
 City-St-Zip:

Title: MGR ( ) Delete Title: MGRM (X) Change ( ) Addition Name: ROSS, ANDREW MGRM Name: ROSS, ANDREW MGRM

Address: 75 MYLES STANDISH ROAD Address: 995 MAIN ROAD
City-St-Zip: WESTON, MA 02493 City-St-Zip: TIVERTON, RI 02878

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

 Name:
 KUNIAN, LOIS
 Name:
 KUNIAN, LOIS MGRM

 Address:
 308 MARLBOROUGH STREET
 Address:
 995 MAIN ROAD

 City-St-Zip:
 BOSTON, MA 02116
 City-St-Zip:
 TIVERTON, RI 02878

Title: MGR () Delete Title: MGRM (X) Change () Addition Name: KATZ-COHEN, SUSAN MGRM Name: KATZ-COHEN, SUSAN MGRM

 Address:
 P O BOX 66
 Address:
 995 MAIN ROAD

 City-St-Zip:
 WEST NEWTON, MA 02465
 City-St-Zip:
 TIVERTON, RI 02878

I hereby certify that the information supplied with this filing does not qualify for the 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: LOIS KUNIAN MGRM 04/14/2007