

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # M98000000502

1. Entity Name

CSC II, L.L.C.



FILED

04 APR 21 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
5080 SPECTRUM DRIVE, SUITE 1050-E
ADDISON TX 75001

Mailing Address
5080 SPECTRUM DRIVE, SUITE 1050-E
ADDISON TX 75001

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

MOORE

CR2E083 (11/03)

4. FEI Number
75-2764083

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME SMITH, TIMOTHY B
STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1050-E
CITY-ST-ZIP ADDISON TX 75001

TITLE MGR ☒ Delete
NAME LANDIN, ROBERT D
STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1050-E
CITY-ST-ZIP ADDISON TX 75001

TITLE MGR ☒ Delete
NAME FOLK, JENNIFER L
STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1050-E
CITY-ST-ZIP ADDISON TX 75001

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☐ Change ☒ Addition
NAME Ron J. Hoyl
STREET ADDRESS 5080 Spectrum Drive, Suite 1050 E
CITY-ST-ZIP Addison, Texas 75001

TITLE MGR ☐ Change ☒ Addition
NAME Robin K. Minick
STREET ADDRESS 5080 Spectrum Drive, Suite 1000 E
CITY-ST-ZIP Addison, Texas 75001

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
900034409499
04/28/04--01028--012 **50.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3-29-04

Date

972-980-2200

Daytime Phone #

Ron J. Hoyl, Manager