

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000502

FILED
Apr 21, 2006
Secretary of State

Entity Name: CSC II, L.L.C.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 75-2764083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, TIMOTHY B
Address: 5080 SPECTRUM DRIVE, SUITE 1050-E
City-St-Zip: ADDISON, TX 75001

Title: MGR () Delete
Name: MINICK, ROBIN K
Address: 5080 SPECTRUM DRIVE, SUITE 1000-E
City-St-Zip: ADDISON, TX 75001

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: MINICK, ROBIN K
Address: 5080 SPECTRUM DRIVE, SUITE 1050-E
City-St-Zip: ADDISON, TX 75001

Title: MGR () Change (X) Addition
Name: JOHNSON, L.J.
Address: 5080 SPECTRUM DRIVE, SUITE 1050-E
City-St-Zip: ADDISON, TX 75001

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: L.J. JOHNSON

MGR

04/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date