

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90041 018 \*\*\*\*50.00

**DOCUMENT # M98000000637**

1. Entity Name

S&A FEE PROPERTIES SPE 2, L.L.C.



Principal Place of Business

6500 INTERNATIONAL PKWY  
STE 1000  
PLANO, TX 75093

Mailing Address

6500 INTERNATIONAL PKWY  
ATTN: TAX DEPT.  
PLANO, TX 75093

**DO NOT WRITE IN THIS SPACE**



04202005No Chg-LLC

CR2E083 (10/03)

4. FEI Number

NOT APPLICABLE

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

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee Is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE DCP  
NAME BROMBERG, MARK  
STREET ADDRESS 6500 INTERNATIONAL PKWY STE 1000  
CITY-ST-ZIP PLANO, TX 75093

TITLE DVST  
NAME CHAMBERLAIN, ROBIN  
STREET ADDRESS 6500 INTERNATIONAL PKWY STE 1000  
CITY-ST-ZIP PLANO, TX 75093

TITLE MGRM  
NAME S&A PROPERTIES CORP.  
STREET ADDRESS 6500 INTERNATIONAL PARKWAY  
CITY-ST-ZIP PLANO, TX 75093

TITLE MGRD  
NAME STAWIKEY, MARY S  
STREET ADDRESS 6500 INTERNATIONAL PKWY STE 1000  
CITY-ST-ZIP PLANO, TX 75093

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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:**

ROBIN CHAMBERLAIN  
EXECUTIVE VICE-PRESIDENT

**APR 22 2005**

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

Date

Daytime Phone #