

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001252

Entity Name: BHMC GENPAR, L.L.C.

FILED  
Apr 19, 2004  
Secretary of State

## Current Principal Place of Business:

THREE RAVINIA DRIVE  
SUITE 2900  
ATLANTA, GA 30346

## New Principal Place of Business:

## Current Mailing Address:

THREE RAVINIA DRIVE  
SUITE 2900, TAX DEPARTMENT  
ATLANTA, GA 30346

## New Mailing Address:

FEI Number: 75-2771070

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/MEMBERS:

Title: MGR ( ) Delete  
Name: TARANTINI, JOHN  
Address: THREE RAVINIA DRIVE, SUITE 2900  
City-St-Zip: ATLANTA, GA 30346

Title: MGR ( ) Delete  
Name: CHITTY, ROBERT  
Address: THREE RAVINIA DRIVE, SUITE 2900  
City-St-Zip: ATLANTA, GA 75001

Title: MGR ( ) Delete  
Name: HOM, DAVID  
Address: THREE RAVINIA DRIVE, SUITE 2900  
City-St-Zip: ATLANTA, GA 30346

Title: MGR ( ) Delete  
Name: HOMER, TORRES  
Address: THREE RAVINIA DRIVE, SUITE 2900  
City-St-Zip: ATLANTA, GA 30346

Title: MGR ( ) Delete  
Name: MEYER-ROBERTS, BARBARA  
Address: 747 THIRD AVENUE, 26TH FLOOR  
City-St-Zip: NEW YORK CITY, NY 10017

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

## ADDITIONS/CHANGES:

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

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

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

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

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

Title: MGR ( ) Change (X) Addition  
Name: GUNKEL, ROBERT  
Address: THREE RAVINIA DRIVE  
City-St-Zip: ATLANTA, GA 30346

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA MEYER-ROBERTS

MGR

04/19/2004

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