

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001252

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

FILED
Apr 28, 2005
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: MGR () Delete
Name: GUNKEL, ROBERT
Address: THREE RAVINIA DRIVE
City-St-Zip: ATLANTA, GA 30346

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

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

04/28/2005

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