

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000005139

Entity Name: LAKESIDE CENTER II (EDENS), LLC**Current Principal Place of Business:**1221 MAIN STREET, SUITE 1000
COLUMBIA, SC 29201**Current Mailing Address:**1221 MAIN STREET, SUITE 1000
COLUMBIA, SC 29201 US**FEI Number:** 58-2327871**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Authorized Person(s) Detail :**

Title	MGRM
Name	EDENS LIMITED PARTNERSHIP
Address	1221 MAIN STREET, SUITE 1000
City-State-Zip:	COLUMBIA SC 29201

Title	CEO
Name	MCLEAN, JODIE W
Address	1221 MAIN STREET, SUITE 1000
City-State-Zip:	COLUMBIA SC 29201

Title	CFO
Name	GARSHIDE, MARK P
Address	1221 MAIN STREET, SUITE 1000
City-State-Zip:	COLUMBIA SC 29201

Title	MD
Name	CALDWELL, WILLIAM
Address	1221 MAIN STREET, SUITE 1000
City-State-Zip:	COLUMBIA SC 29201

Title	SVP INVESTMENTS
Name	SHIMAN, NICOLE
Address	500 E. BROWARD BLVD STE. 1620
City-State-Zip:	FORT LAUDERDALE FL 33301

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK P. GARSHIDE

CFO

04/11/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date