

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 19, 2006  
Secretary of State**

DOCUMENT# L02000005268

Entity Name: BADGER WOLVERINE LLC

**Current Principal Place of Business:**

1600 ROYAL PALM WAY  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

1600 ROYAL PALM WAY  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 90-0218381      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROSEMURGY, JAMES M  
1600 ROYAL PALM WAY  
BOCA RATON, FL 33432 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: MGRM ( ) Delete  
Name: ROSEMURGY FAMILY, LL, C  
Address: 1600 ROYAL PALM WAY  
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGR ( ) Delete  
Name: ROSEMURGY, JAMIE M  
Address: 1600 ROYAL PALM WAY  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES:**

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

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 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: JAMIE ROSEMURGY

MGR

04/19/2006

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