


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 29, 2008 08:00 A
Secretary of State

DOCUMENT # L02000033178	
1. Entity Name BATSON MANAGEMENT, L.L.C.	

Principal Place of Business 715 N BAYLEN STREET PENSACOLA, FL 32501	Mailing Address P.O. BOX 12266 PENSACOLA, FL 32591-2266
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02262008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0569396	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BATSON, SUSAN C
 715 N BAYLEN STREET
 PENSACOLA, FL 32501

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000843713
 03/12/08-80006-016 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANTHONY, CYNTHIA B 413 AUTUMN OAK DRIVE MADISON, MS 39110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STOKEY, ANN B 3377 FAIRWAY DRIVE GAINESVILLE, GA 30506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BATSON, SUSAN C 715 N. BAYLEN ST. PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Susan Crockett Batson **SUSAN CROCKETT BATSON,**
 MANAGING MEMBER
 Date: 2/26/08 Daytime Phone #: 850.438.7501

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