2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093693

Entity Name: B.S. INVESTMENTS, LLC

FILED Mar 12, 2007 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business:

4140 NW 27 LANE, STE. G 394 TURKEY CREEK GAINESVILLE, FL 326066600 ALACHUA, FL 32615

Current Mailing Address: New Mailing Address:

4140 NW 27 LANE, STE. G 394 TURKEY CREEK GAINESVILLE, FL 326066600 ALACHUA, FL 32615

FEI Number: 20-2140350 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BLAIR, CAROLE M BLAIR, CAROLE M 4140 NW 27 LANE, STE. G 394 TÚRKEY CREEK GAINESVILLE, FL 326066600 US US ALACHUA, FL 32615

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: CAROLE M BLAIR

03/12/2007

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete

BLAIR, CAROLE M BLAIR, CAROLE M Name: Name: 4140 NW 27 LANE, STE. G Address: 394 TURKEY CREEK Address: City-St-Zip: GAINESVILLE, FL 326066600 City-St-Zip: ALACHUA, FL 32615

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SIBLY, AARON M Name: SIBLY, AARON M

Address: 5029 HEALEY DRIVE Address: 235 MEADOW PATH DRIVE City-St-Zip: SMYRNA, GA 30082 City-St-Zip: MARIETTA, GA 30064

Title: MGRM () Delete Title: () Change () Addition

BLAIR, EDWARD V Name: Name: Address: 394 TURKEY CREEK Address: City-St-Zip: ALACHUA, FL 32615 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: CAROLE M BLAIR 03/12/2007