2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000005244

Entity Name: AMBERJACK MLB, LLC

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11540 HIGHWAY 92 EAST SEFFNER, FL 33584 **Current Mailing Address: New Mailing Address:** 11540 HIGHWAY 92 EAST SEFFNER, FL 33584 FEI Number: 26-3716778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BEVER, DAVID A 100 NORTH TAMPA STREET, SUITE 2200 TAMPA, FL 33602 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: ADDITIONS/CHANGES: Title: () Delete (X) Change () Addition SEAMAN, JEFFREY Name: SEAMAN, JEFFREY Name: 400 PERIMETER CENTER TERRACE SUITE 800 Address: 400 PERIMETER CENTER TERRACE SUITE 800 Address: City-St-Zip: ATLANTA, GA 30346 City-St-Zip: ATLANTA, GA 30346 Title: Title: () Change (X) Addition () Delete Name: Name: STEIN, LEWIS PRES Address: Address: 11540 HIGHWAY 92 EAST City-St-Zip: City-St-Zip: SEFFNER, FL 33584 Title: () Delete Title: MGR () Change (X) Addition WEITZNER, PETER VP Name: Name: 400 PERIMETER CENTER TERRACE, SUITE 800 Address: Address: City-St-Zip: City-St-Zip: ATLANTA, GA 30346 () Change (X) Addition Title: () Delete Title: MGR Name: Name: FINKEL, JEFFREY VP 400 PERIMETER CENTER TERRACE, SUITE 800 Address: Address: City-St-Zip: City-St-Zip: ATLANTA, GA 30346 Title: () Delete Title: () Change (X) Addition KETTLE, MIKE VP, TRE Name: Name: 400 PERIMETER CENTER TERRACE, SUITE 800 Address: Address: City-St-Zip: City-St-Zip: ATLANTA, GA 30346 Title: () Delete Title: () Change (X) Addition SHEER, JAMIE VP, SEC Name: Name: Address: Address: 11540 HIGHWAY 92 EAST SEFFNER, FL 33584 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LEWIS STEIN MGR 02/16/2009