

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001456

FILED
Jan 19, 2007
Secretary of State

Entity Name: BAD MOON RISING (TITLE), LLC

Current Principal Place of Business:

500 SOUTH FLORIDA AVENUE, SUITE 800
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

500 SOUTH FLORIDA AVENUE, SUITE 800
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 03-0434171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, RONALD L
500 SOUTH FLORIDA AVENUE, SUITE 800
LAKELAND, FL 33801 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: MGR () Delete
Name: CLARK, RONALD L
Address: 500 S. FLORIDA AVE, STE 800
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES:

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: RONALD L. CLARK

MGR

01/19/2007

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