ORIGINAL 2008_LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000030379

1. Entity Name
BADGER PROPERTIES, LLC



Principal Place of Business

C/O SAVE-ON AUTO PARTS 239 SOUTH DIXIE HIGHWAY POMPANO BEACH, FL 33060 Mailing Address

C/O SAVE-ON AUTO PARTS 239 SOUTH DIXIE HIGHWAY POMPANO BEACH, FL 33060

FILED May 01, 2008 08:00 AN Secretary of State



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04222008 No Chg-LLC CR2E083 (12/07)

4. FEI Number Applied For 38-3665094 Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

MOGERMAN, RICHARD M 150 SOUTH PINE ISLAND, SUITE 130 PLANTATION, FL 33324 DO NOT WRITE IN THIS SPACE

	Signature, typed or printed name of registered agent and tills if applicable			(NOTE I	(NOTE Registered Agent signature required when reinstating)						DATE	
S	GNATURE				•	• •		-				
		\$										
	the obligations of registered agent.											
8.	The above named entity submits this state	ment for the p	surpose of chan	ging its re	gistered	office of	ir registerea	agent, or I	both, in th	e State of Florida.	i am tamiliar	with, and accept

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

U00000936838 05/27/08-80025-011 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TURNER, ARTHUR 2700 NORTHEAST 10TH STREET POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAFF, MARTIN 12312 N.W. 26TH STREET CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>-</u>
NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filling does not qualify for the e

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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: MARTIN SHAFF 4/28/08

BIGHATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGUM MEMBER, OR AUTHORIZED REPRESENTATIVE Date Date District Phone 4