LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

L02000033178 **DOCUMENT #**

1. Entity Name

BATSON MANAGEMENT, L.L.C.

FILED May 09, 2003 8:00 am Secretary of State 05-09-2003 90055 009 ****50.00

850-438-7501 Daytime Phone #

DO NOT WRITE IN THIS SPACE 2. Principal Place of Business . 3. Mailing Address						TOTOLLI	
715 North Baylen Street			P. O. Box 12266				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State			City & State Pensacola, Florida			4. FEI Number	X Applied For
	nsacola, Florida		 			Not Applicable	
Zip 32501		Country U. S. A.	Zip 32591-2266	Country U. S. A.		5. Certificate of Status Desired	\$5.00 Additional Fee Required
						7. Name and Address of Current Register	ered Agent
DO NOT INT			Name Susan Crocke		ett. Betson		
DO NOT WE			Street Address (P.O. Box Number is Not Acceptable) -		
	- 11	V THIS SP			yLen Street		
		in the Control of the					
					City P ensacola	F	Zip Code 32501
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 Signature, typed or printed name of registered agent and title if applicable. DATE							
Signature, typed of primed name or registered agent and use if applicable.							
*.			Make Check Payable to Florida Departmen			nt of State	
		: . ·	DUE BY MAY 1			3 T 17 T 1	
9.		MANAGING MEMBER	S/MANAGERS			4 (E. 16.7) (A. 17.) (12.)	
TITLE	Manager				E		
NAM.		Batson Anthony		NAM	CARTAGORIA CONTRACTOR AND CONTRACTOR		
STREET ADDRESS CITY-ST-ZIP		tum Oak Drive	STREET ADDRESS CITY-ST-ZIP				
TITLE	Madison, MS 39110			2756427555 4464-14641			
NAME ·	Manager			,titli Nam			
STREET ADDRESS	Ann Batson Stokey		STREET ADDRESS		receipe concrete the resonance of		
CITY-ST-ZIP	3377 Fairway Drive Cainesville, GA 30506			ATTEMPTED.	-ST-ZIP	antan jarah dan sebagai dan kembanan bandan dan berahasi berahasi berahasi berahasi berahasi berahasi berahasi Bandan bandan berahasi berahas	
TITLE	Manager			Jilu			
NAME	Susan C		NAM				
STREET ADDRESS		th Baylen Street	STREET ADDRESS		DO NOT WE	ute .	
CITY-ST-ZIP			CITY ST-ZIP		-ST-ZIP	DO NOT WRITE	
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TITLE			-	ned rates	and the state of t		
NAME	•			NAM			
STREET ADDRESS				344	ET ADDRESS		
CITY-ST-ZIP	.'	•		Marie Carting Street	-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.							