

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040405

Entity Name: BACHELOR, LLC

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

2104 DELTA WAY, SUITE 2
TALLAHASSEE, FL 32303

New Principal Place of Business:

2104 DELTA WAY, SUITE 2
TALLAHASSEE, FL 32303 US

Current Mailing Address:

P.O. BOX 15855
TALLAHASSEE, FL 32317

New Mailing Address:

P.O. BOX 15855
TALLAHASSEE, FL 323175855 US

FEI Number: 55-0848221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOVLAIN, PAUL J
2104 DELTA WAY, SUITE 2
TALLAHASSEE, FL 32303 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: MGRM () Delete
Name: SHOVLAIN, PAUL J
Address: 2104 DELTA WAY, SUITE 2
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHOVLAIN, PAUL J
Address: 2104 DELTA WAY, SUITE 2
City-St-Zip: TALLAHASSEE, FL 32303 US

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: PAUL J SHOVLAIN

MGRM

04/25/2007

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