

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054079

FILED
Apr 08, 2007
Secretary of State

Entity Name: TADPOLE VENTURES, LLC

Current Principal Place of Business:

4004 BOBBIN BROOK CIRCLE
TALLAHASSEE, FL 32312

New Principal Place of Business:

1010 LOTHIAN DRIVE
TALLAHASSEE, FL 32312

Current Mailing Address:

1010 LOTHIAN DRIVE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 20-1381076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, BARBARA
4004 BOBBIN BROOK CIR.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

O'NEAL, DONNA
1010 LOTHIAN DRIVE
TALLAHASSEE, FL 32312 US

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: DONNA M. O'NEAL

04/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: DAVIDSON, BARBARA
Address: 4004 BOBBIN BROOK CIR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM (X) Delete
Name: DAVIS, ANNE
Address: 4004 BOBBIN BROOK CIR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: O'NEAL, DONNA
Address: 1010 LOTHIAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: ALEXIONOK, LINDA
Address: 1010 LOTHIAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DONNA M. O'NEAL

MGRM

04/08/2007

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