

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000067759

FILED
Jul 27, 2007
Secretary of State**Entity Name:** FATBOYS LLC**Current Principal Place of Business:**6800 N. PALAFOX ST.
PENSACOLA, FL 32503 US**New Principal Place of Business:****Current Mailing Address:**2603 W. LLOYD ST.
PENSACOLA, FL 32505 US**New Mailing Address:**8209 LI FAIR DR.
PENSACOLA, FL 32506 US**FEI Number:** 20-3123992**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**JONES, DAVID B
2603 W. LLOYD
PENSACOLA, FL 32505 US**Name and Address of New Registered Agent:**RADCLIFFE, JOHN P
8209 LI FAIR DR.
PENSACOLA, FL 32506 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: JOHN RADCLIFFE

07/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: RADCLIFFE, JOHN
Address: 8209 LI FAIR DR
City-St-Zip: PENSACOLA, FL 32506 US**Title:** MGRM (X) Delete
Name: JONES, DAVID B
Address: 2603 W. LLOYD
City-St-Zip: PENSACOLA, FL 32505 US**ADDITIONS/CHANGES:****Title:** OWNR (X) Change () Addition
Name: RADCLIFFE, JOHN
Address: 8209 LI FAIR DR
City-St-Zip: PENSACOLA, FL 32506 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN RADCLIFFE

OWNR

07/27/2007

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