2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000111130

1. Entity Name BT TALLAHASSEE, LLC



FILED Apr 25, 2008 08:00 AN Secretary of State

Principal Place of Business

1425 WEST TENNESSEE STREET TALLAHASSEE, FL 32304

Mailing Address

2660 EAST CHASE LN STE 100 MONTGOMERY, AL 36117



04222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8165842

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additiona Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

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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 (NC	OTE: Registered Agent signature required when reinstating)	DATE
After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILSON, JAMES W III 2660 EASTCHASE LANE, SUITE 100 MONTGOMERY, AL 36117		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILSON, WILLIAM B 2660 EASTCHASE LANE MONTGOMERY, AL 36117		U00000922112 OS/15/08-80033-019 138.75
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TITLE #1879#			
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STREET ADDRESS CITY-ST- ZIP	of these continues.	1 4 4 4 4 7 37, TO TUE, 1.	F. C.
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 act trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			