

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112785

Entity Name: BAMBOO PUBLISHING, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

1869 E. WINDWOOD WAY
TALLAHASSEE, FL 32311

New Principal Place of Business:

1180 LANDINGS LOOP
TALLAHASSEE, FL 32311

Current Mailing Address:

1869 E. WINDWOOD WAY
TALLAHASSEE, FL 32311

New Mailing Address:

400 CAPITAL CIRCLE SE
SUITE 18, #136
TALLAHASSEE, FL 32301

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARLEDGE, ELIZABETH E
1869 E. WINDWOOD WAY
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

ARLEDGE, ELIZABETH E
1180 LANDINGS LOOP
TALLAHASSEE, FL 32311 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:

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ARLEDGE, ELIZABETH E
Address: 1869 E. WINDWOOD WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: MGRM (X) Delete
Name: RATLIFF, SHERRI D
Address: 1869 E. WINDWOOD WAY
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ARLEDGE, ELIZABETH E
Address: 1180 LANDINGS LOOP
City-St-Zip: TALLAHASSEE, FL 32311

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: ELIZABETH E. ARLEDGE

MGRM

04/29/2008

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