

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**May 02, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # M98000001052**

1. Entity Name

**BADGER ACQUISITION OF TAMPA LLC**



Principal Place of Business

**100 E RIVERCENTER BLVD STE 1600  
COVINGTON, KY 41011**

Mailing Address

**100 E RIVERCENTER BLVD STE 1600  
COVINGTON, KY 41011**



04012005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**52-2119893**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE  
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BADGER ACQUISITION LLC
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011
TITLE	MGR
NAME	FINN, TRACY
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011
TITLE	MGR
NAME	ABBOTT, BRADLEY S
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011
TITLE	MGR
NAME	MARSH, THOMAS R
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011
TITLE	MGR
NAME	ROBBINS, REGIS
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011
TITLE	MGR
NAME	WILLIAMS, JACK
STREET ADDRESS	100 EAST RIVERCENTER BLVD, STE 1600
CITY-ST-ZIP	COVINGTON, KY 41011

U00000356722  
05/04/05-80044-025 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Bradley S. Abbott*

**Bradley S. Abbott**

**04/12/2005**

**859-392-3347**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #