2007 LIMITED LIABILITY COMPANY ANNUAL REPORT



FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90029 050 ****50.00

DOCUMENT # M98000001052 1. Entity Name

BADGER ACCUISITION OF TAMPA LLC

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Principal Place of Business 100 E RIVERCENTER BLVD STE 1600 COVINGTON, KY 41011		Mailing Address 100 E RIVERCENTER BLVD STE 1600 COVINGTON, KY 41011		e	0040201				
)		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04232007	Chg-LLC	CR2E0	83 (12/06)		
City & State		City & State		4. FEI Number 52-2119			<u> </u>	pplied For	
Zip	Country	Zip	Count	ıy		of Status Desired		\$5.00 Add	litional
	6. Name and Address of Current	Registered Agent	1		7. Name and	Address of New			<u>u</u>
				Name				· 	
1201 HAY	ATION SERVICE COMPANY 'S STREET SSEE, FL 32301-2525			Street Address (P.O. Box Numbe	er is Not Acceptab	le)		_
1712271170	OOLL, 1 2 02001 2020								
				City			FL	Zip Code	9
8. The above	named entity submits this statement to	or the purpose of changing its	s registere	d office or register	red agent, or bot	h, in the State of F		amiliar with,	and accept
the obliga	tions of registered agent.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO)	TE: Registered	Agent signature required	t when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2007							ke check p ia Departm	-	е
9.	MANAGING MEMBI	ERS/MANAGERS	10.			ADDITIONS	CHANGES		
TITLE	MGRM	☐ Delete	TITLE					☐ Change	Addition
NAME STREET ADDRESS			NAME	T ADDRESS					
CITY-ST-ZIP	COVINGTON, KY 41011	D, 31L 1000		ST-ZIP					
TITLE	MGR	☐ Delete	TITLE					☐ Change	Addition
NAME	FINN, TRACY		NAME						
STREET ADDRESS CITY-ST-ZIP	100 EAST RIVERCENTER BLVI COVINGTON, KY 41011	D, STE 1600		ET ADDRESS ST-ZIP					
TITLE	MGR	□ Delete	TITLE					☐ Change	Addition
NAME	ABBOTT, BRADLEY S	Delete	NAME					snange	
STREET ADDRESS		D, STE 1600		ET ADDRESS					
CITY-ST-ZIP	COVINGTON, KY 41011			ST-ZIP	 				
TITLE NAME	MGR MARSH, THOMAS R	☐ Delete	TITLE					Change	☐ Addition
STREET ADDRESS	' '	D, STE 1600	- 6	ET ADDRESS					
CITY-ST-ZIP	COVINGTON, KY 41011		CITY-	ST-ZIP					
TITLE	MGR	☐ Delete	TITLE	1	<u> </u>			Change	☐ Addition
NAME OTREET ADDRESS	ROBBINS, REGIS	D STE 1600	NAME	ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	100 EAST RIVERCENTER BLVI COVINGTON, KY 41011	U, G1E 1000		ST-ZIP					
TITLE	MGR	Delete	TITLE					Change	Addition
NAME	WILLIAMS, JACK	•	NAME						
STREET ADDRESS CITY-ST-ZIP	100 EAST RIVERCENTER BLVI COVINGTON, KY 41011	D, STE 1600		ET ADORESS - ST- ZIP					

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE Samuel Muse	Thomas R. Marsh	04/23/2007	(859) 392-73	<u>58</u>
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			