

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064559

FILED
Apr 06, 2006
Secretary of State

Entity Name: BARBARA T, LLC

Current Principal Place of Business:

725 KINGSTON CT
APOLLO BEACH, FL 335722428

New Principal Place of Business:

<UNUSED>
LAKELAND, FL 33811

Current Mailing Address:

725 KINGSTON CT
APOLLO BEACH, FL 335722428

New Mailing Address:

PO BOX 827
MULBERRY, FL 33860

FEI Number: 20-1534434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEXTER, HARLEIGH A
725 KINGSTON CT
APOLLO BEACH, FL 335722428 US

Name and Address of New Registered Agent:

TEXTER, HARLEIGH A
1335 LONGOAK DR N
LAKELAND, FL 33811 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:

04/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TEXTER, BARBARA U
Address: 725 KINGSTON CT
City-St-Zip: APOLLO BEACH, FL 335722428

Title: MGRM () Delete
Name: TEXTER, HARLEIGH A
Address: 725 KINGSTON CT
City-St-Zip: APOLLO BEACH, FL 335722428

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TEXTER, BARBARA U
Address: 1335 LONGOAK DR N
City-St-Zip: LAKELAND, FL 33811

Title: MGRM (X) Change () Addition
Name: TEXTER, HARLEIGH A
Address: 1335 LONGOAK DR N
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the 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: HARLEIGH A TEXTER

MGRM

04/06/2006

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