

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064559

**FILED
Jan 11, 2008
Secretary of State**

Entity Name: BARBARA T, LLC

Current Principal Place of Business:

New Principal Place of Business:

<UNUSED>
LAKELAND, FL 33811

Current Mailing Address:

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:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

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: BARBARA U TEXTER

MGRM

01/11/2008

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