


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State


DOCUMENT # L05000024386

1. Entity Name
BARTOW INVESTMENT PROPERTIES, LLC



Principal Place of Business 4940 SOUTHFORK DR LAKELAND, FL 33813	Mailing Address 4940 SOUTHFORK DR LAKELAND, FL 33813
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DO NOT WRITE IN THIS SPACE



04282008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2185831	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BEASLEY, RYAN
 4940 SOUTHFORK DR
 LAKELAND, FL 33813**

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 _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000936919
 05/27/08-80028-024 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEASLEY, RYAN 4940 SOUTHFORK DR LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAUNDERS, JOE 5529 US HWY 98 N LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAUNDERS, LEE 5529 US HWY 98 N LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAUNDERS, RICHARD 5529 US HWY 98 N LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *Ryan Beasley* Date: 4/29/08 Daytime Phone #: 863-646-1373

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #