

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAY 23 AM 7:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L94000000182

1. Entity Name
BARRETT TECHNOLOGIES, L.C.

Principal Place of Business
11510 HERON HILLS LN
RIVERVIEW FL 33569

Mailing Address
1913 EAST SKYLINE DR
CLEARWATER FL 33763-4540



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
11510 Heron Hills LN
Suite, Apt. #, etc.

City & State
Riverview FL

4. FEI Number 59-3238955
Applied For Not Applicable

Zip 33569 Country US

5. Certificate of Status Desired \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRETT, KENNETH W
11510 HERON HILL LN
RIVERVIEW FL 33569

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

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 \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	MGR BARRETT, KENNETH W 11510 HERON HILLS LN RIVERVIEW FL 33569	<input type="checkbox"/> Change <input type="checkbox"/> Addition	200003287682--1 -06/13/00--01090--002 *****50.00 *****50.00
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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: Kenneth W. Barrett **SIGNATURE REQUIRED** 5/17/00 813.672.9192
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (9/99)