

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000088933

**Entity Name:** BARNES FAMILY, LLC

**Current Principal Place of Business:**

3301 BAYSHORE BOULEVARD  
APT. 403  
TAMPA, FL 33629

**Current Mailing Address:**

3301 BAYSHORE BOULEVARD  
APT. 403  
TAMPA, FL 33629 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARNES, LEWIS A  
3301 BAYSHORE BOULEVARD  
APT. 403  
TAMPA, FL 33629 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

**Authorized Person(s) Detail :**

Title MGRM  
Name LEWIS A. BARNES REVOCABLE TRUST  
Address 3301 BAYSHORE BLVD. APT. 403  
City-State-Zip: TAMPA FL 33629

Title MGRM  
Name ENID F. GILBERT-BARNES REVOCABLE TRUST  
Address 3301 BAYSHORE BLVD. APT. 403  
City-State-Zip: TAMPA FL 33629

Title MANAGER AND MANAGING MEMEBER  
Name BARNES, JOSEPH M.  
Address 5729 SWEET CHERRY LANE  
City-State-Zip: LAND O LAKES FL 34639

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSEPH M. BARNES

MGMR AND MANAGER

05/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date