

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000023686

Entity Name: BARRETT EVANS CAPITAL LLC**Current Principal Place of Business:**611 DRUID ROAD EAST
SUITE 407
CLEARWATER, FL 33756**Current Mailing Address:**611 DRUID ROAD EAST
SUITE 407
CLEARWATER, FL 33756 US**FEI Number:** 27-5130723**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUCCESSFUL PORTFOLIOS LLC
611 DRUID ROAD EAST
SUITE 407
CLEARWATER, FL 33756 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	MANAGER
Name	SUCCESSFUL PORTFOLIOS LLC
Address	611 DRUID ROAD EAST SUITE 407
City-State-Zip:	CLEARATER FL 33756

Title	AUTHORIZED REPRESENTATIVE
Name	BAER, JOE
Address	611 DRUID ROAD EAST SUITE 407
City-State-Zip:	CLEARWATER FL 33756

Title	AUTHORIZED REPRESENTATIVE
Name	EVANS, H PARKER
Address	611 DRUID ROAD EAST SUITE 407
City-State-Zip:	CLEARWATER FL 33756

Title	MANAGER
Name	JB MANAGEMENT, INC.
Address	2240 BELLEAIR RD SUITE 100
City-State-Zip:	CLEARWATER FL 33764

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOE BAER**AUTHORIZED
REPRESENTATIVE****01/27/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date