# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000016087

Entity Name: BARTHELMESS FLORIDA, L.C.

## FILED Apr 24, 2006 Secretary of State

#### Current Principal Place of Business: New Principal Place of Business:

% SSI ACCOUNTING AND TAX SERVICE INC.
1500 COLONIAL BLVD. STE. 235
FORT MYERS, FL 33907
% SSI ACCOUNTING AND TAX SERVICE INC.
3620 COLONIAL BLVD. STE. 230
FORT MYERS, FL 33912

**New Mailing Address:** 

Current Mailing Address:

% SSI ACCOUNTING AND TAX SERVICE INC.

1500 COLONIAL BLVD. STE. 235 FORT MYERS, FL 33907 % SSI ACCOUNTING AND TAX SERVICE INC. 3620 COLONIAL BLVD. STE. 230

FORT MYERS, FL 33912

FEI Number: 65-1072760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

### Name and Address of Current Registered Agent:

SSI ACCOUNTING AND TAX SERVICE INC. 1500 COLONIAL BLVD. STE. 235

FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

SSI ACCOUNTING AND TAX SERVICE INC. 3620 COLONIAL BLVD. STE. 230

FORT MYERS, FL 33912 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: SCHMITZ 04/24/2006

Electronic Signature of Registered Agent Date

#### MANAGING MEMBERS/MANAGERS:

 Title:
 MGR
 ( ) Delete

 Name:
 BARCANA FLORIDA, INC, .

 Address:
 1500 COLONIAL BLVD. #235

 City-St-Zip:
 FORT MYERS, FL 33907

Title: ( ) Delete Name: Address:

Title: ( ) Delete

Name: Address:

City-St-Zip:

City-St-Zip:

#### ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARCANA FLORIDA, INC, .
Address: 3620 COLONIAL BLVD. #230
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Change (X) Addition
Name: BARTHELMESS, INGEBORG
Address: 3620 COLONIAL BLVD
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Change (X) Addition
Name: SCHMITZ, SEBASTIAN
Address: 3620 COLONIAL BLVD # 230
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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: INGEBORG BARTHELMESS

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04/24/2006