

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028033

FILED
Apr 06, 2006
Secretary of State

Entity Name: BARRIER IMP, LLC

Current Principal Place of Business:

173 SKIPPING STONE LN
NAPLES, FL 34119

New Principal Place of Business:

1141 SUN CENTURY ROAD
NAPLES, FL 34110

Current Mailing Address:

PO BOX 11271
NAPLES, FL 34101

New Mailing Address:

PO BOX 1671
PAGOSA SPRINGS, CO 81147

FEI Number: 38-3663301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADLEY, MICHAEL S
173 SKIPPING STONE LN
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

BRADLEY, MICHAEL S
25 CASTLE PLACE
PAGOSA SPRINGS, CO, FL 81147 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: MICHAEL S. BRADLEY

04/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRADLEY, MONICA K
Address: 173 SKIPPING STONE LN
City-St-Zip: NAPLES, FL 34119

Title: MGRM () Delete
Name: BRADLEY, MICHAEL S
Address: 173 SKIPPING STONE LN
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRADLEY, MONICA K
Address: 25 CASTLE PLACE
City-St-Zip: PAGOSA SPRINGS, CO 81147

Title: MGRM (X) Change () Addition
Name: BRADLEY, MICHAEL S
Address: 25 CASTLE PLACE
City-St-Zip: PAGOSA SPRINGS, CO 81147

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: MONICA K. BRADLEY

MNGR

04/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date