


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000007050
 1. Entity Name
 BARRINGTON PARK, LLC



Principal Place of Business 359 CAROLINA AVE. WINTER PARK, FL 32789	Mailing Address 359 CAROLINA AVE. WINTER PARK, FL 32789
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01032006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 51-0454191	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 DOWNING, GRANT T
 222 WEST COMSTOCK AVE., STE. 101
 WINTER PARK, FL 32789

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$50.00
Due by May 1, 2006

1000000461884
 03/21/06 80014-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <i>CRC</i> ONE BARRINGTON PARK, LLC 24 FRANK LLOYD WRIGHT DR., 4TH FL ANN ARBOR, MI 48106
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EPI-BARRINGTON PARK, LLC 359 CAROLINA AVE. WINTER PARK, FL 32789
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ DATE: *1/4/06*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #