


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000019077 1. Entity Name BARRINGTON DEVELOPMENT COMPANY, LLC	
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Principal Place of Business 1 SOUTH SCHOOL AVENUE, SUITE 500 C/O BARRINGTON GROUP, INC. SARASOTA, FL 34237	Mailing Address 1 SOUTH SCHOOL AVENUE, SUITE 500 C/O BARRINGTON GROUP, INC. SARASOTA, FL 34237
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02252005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 76-0733584	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

BARRINGTON GROUP INC.
1 SOUTH SCHOOL AVENUE, SUITE 500
SARASOTA, FL 34237

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LIEBERMAN, LARRY 15 SCHOOL AVE STE 500 SARASOTA, FL 34237
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Bg. [Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date 2/25/05 Daytime Phone # _____