

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000022052

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** BART BLESSING, P.L.

**Current Principal Place of Business:**

3227 SE MARICAMP RD.  
SUITE #102  
OCALA, FL 34471

**New Principal Place of Business:**

3227 SE MARICAMP RD.  
SUITE #100  
OCALA, FL 34471

**Current Mailing Address:**

3227 SE MARICAMP RD.  
SUITE #102  
OCALA, FL 34471

**New Mailing Address:**

3227 SE MARICAMP RD.  
SUITE #100  
OCALA, FL 34471

**FEI Number:** 03-0499333

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLESSING, BART A  
3227 SE MARICAMP RD  
SUITE #102  
OCALA, FL 34471 US

**Name and Address of New Registered Agent:**

BLESSING, BART A  
3227 SE MARICAMP RD  
SUITE #100  
OCALA, FL 34471 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: BART A BLESSING

03/31/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BLESSING, BART A  
Address: 3227 SE MARICAMP RD, SUITE #100  
City-St-Zip: OCALA, FL 34471 US

I hereby 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: BART A BLESSING

MGRM

03/31/2010

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