

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Feb 23, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # L03000045944**

1. Entity Name  
**BARNES ROAD PROPTIES, L.C.**



Principal Place of Business

**1904 SAN MARCO BLVD.  
JACKSONVILLE, FL 32207**

Mailing Address

**1904 SAN MARCO BLVD.  
JACKSONVILLE, FL 32207**



02102005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**42-4606797**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**SLAGLE, SUSAN ESQ.  
1201 SAN AMARO ROAD  
JACKSONVILLE, FL 32207**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
FOSTER, PANLAC  
1904 SAN MARCO BL#4  
JACKSONVILLE, FL 32207**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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02/23/05-80011-024 50.00

**DO NOT WRITE  
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)(f), 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:**

*Panlac Foster*