


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000054090 1. Entity Name TOM BARKER IRRIGATION, LLC	
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Principal Place of Business 10501 NW 60TH TERRACE ALACHUA, FL 32615	Mailing Address 10501 NW 60TH TERRACE ALACHUA, FL 32615
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DO NOT WRITE IN THIS SPACE



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 81-0640255	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BARKER, THOMAS C 10501 NW 60TH TERRACE ALACHUA, FL 32615
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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 _____ <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent by ballot requires and which remains in effect.)</small>
DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000775682
01/08/08-80039-008 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR BARKER, THOMAS C 10501 NW 60TH TERRACE ALACHUA, FL 32615
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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: <u>Thomas C Barker</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
Date: <u>1/3/08</u> <u>362-338-2090</u> <small>Copy Fee \$10.00</small>