2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000000849

1. Entity Name
BARNES GROVES I, LLC



FILED Feb 12, 2007 08:00 AM Secretary of State

CR2E083 (11/05)

Principal Place of Business

865 20TH PLACE

SUITE 1

VERO BEACH, FL 32960

Mailing Address

PO BOX 846

VERO BEACH, FL 32961





4. FEI Number	 Applied For	
59-6183334	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BARNES, THOMAS M JR 865 20TH PL, STE 1 VERO BEACH, FL 32960

DO NOT WRITE IN THIS SPACE

01292007 No Chg-LLC

	e named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or both, in the Sta	te of Florida. I am familiar with, and accept
SIGNATURE.			
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	BARNES, THOMAS M JR		
	AND DOTHER OTE 4	•	

TITLE MGR
NAME BARNES, THOMAS M JR
STREET ADDRESS
GITY-ST-ZIP VERO BEACH, FL 32960
TITLE
NAME
STREET ADDRESS

U00000631930 02/21/07-80001-022 50.00

TITLE
NAME
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CITY-SI-ZIP

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CITY-SI-ZIP

TITLE

DO NOT WRITE IN THIS SPACE

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 eath; 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: Thomam, Barren,

NAME STREET ADDRESS CITY-ST-ZIP

Thomas M. Barnes, Jr.

2/9/2007

(772 569-1163

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ile

Daytime Phone #