2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2006
Secretary of State

DOCUMENT# L04000002885

Entity Name: BARRETTE INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

880 AIRPORT RD
STE 109
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 250724
HOLLY HILL, FL 32125

New Mailing Address:

880 AIRPORT ROAD
SUITE 109
ORMOND BEACH, FL 32174

FEI Number: 20-0625329 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARRETTE, JUDITH H
610 BOICE LANE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

BARRETTE, JUDITH H
880 AIRPORT ROAD
SUITE 109
ORMOND BEACH, FL 32174 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: JUDITH BARRETTE 03/03/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BARRETTE, GUY A
Address: P.O. BOX 250724
City-St-Zip: HOLLY HILL, FL 32125

Title: MGRM ( ) Delete
Name: BARRETTE, JUDITH H
Address: P.O. BOX 250724
City-St-Zip: HOLLY HILL, FL 32125

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: BARRETTE, GUY A
Address: 610 BOICE LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: S/T (X) Change ( ) Addition
Name: BARRETTE, JUDITH H
Address: 610 BOICE LANE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: JUDITH BARRETTE S/T 03/03/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date