


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 26, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000013417 1. Entity Name BARBEE ENTERPRISES, LLC		
Principal Place of Business 9908 SW MARK BARBEE ROAD KINARD, FL 32449 US	Mailing Address 9908 SW MARK BARBEE ROAD KINARD, FL 32449 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BARBEE, JAMES M 9908 SW MARK BARBEE ROAD KINARD, FL 32449		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: <u><i>James M. Barb</i></u> (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BARBEE, JAMES M 9908 SW MARK BARBEE ROAD KINARD, FL 32449	
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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><i>James M. Barb</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		4-20-06 (850) 814-5070 <small>Date Daytime Phone #</small>



04252006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0743704	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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05/06/06-80132-003 50.00

**DO NOT WRITE
IN THIS SPACE**