## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000044379

1. Entity Name
BARRETT FAMILY, LLC



FILED Apr 14, 2006 08:00 AN Secretary of State

Principal Place of Business 2312 HARRIER RUN NAPLES, FL 34105 US Mailing Address 2312 HARRIER RUN NAPLES, FL 34105 US



DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1253242

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSS, DONALD K JR 599 9TH ST. N. SUITE 300 NAPLES, FL 34102

SIGNATURE: Y

SIGNATURE AND TYPED I

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of charitons of registered agent.	anging its registered	d office or registered agent, or both, in	the State 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, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARRETT, JOSEPH T JR 2312 HARRIER RUN NAPLES, FL 34105	·	Į.	U00000509110 04/28/06-80030-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO N	OT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-7IP				

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 reserver of trustoe employered to execute this report as required by Chapter 608, Florida Statutes.

R PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE