

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061429

Entity Name: BARBER WEISFELD, LLC

FILED
Feb 22, 2007
Secretary of State

Current Principal Place of Business:

1200 NORTSHORE DRIVE, NE, UNIT 501
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

1200 NORTSHORE DRIVE, NE, UNIT 501
ST. PETERSBURG, FL 33701

New Mailing Address:

1200 NORTSHORE DRIVE, N.E.,
SUITE 501
ST. PETERSBURG, FL 33701

FEI Number: 20-1510490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, WILLIAM
1200 NORTSHORE DRIVE, NE, UNIT 501
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

BARBER, WILLIAM E
1200 NORTSHORE DRIVE, N.E.,
501
ST. PETERSBURG, FL 33701 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: WILLIAM BARBER

02/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: C () Delete
Name: BARBER, WILLIAM
Address: 1200 NO SHORE DR, N.E., APT 501
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM BARBER

M.D.

02/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date