2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072517

Entity Name: ROWBAR, LLC

Name:

Address:

City-St-Zip:

102 - 1ST ST. N.

BRADENTON, FL 34217 US

FILED Sep 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: BRADENTON, FL 34217 US **Current Mailing Address: New Mailing Address:** 102 - 1ST ST. N BRADENTON, FL 34217 US FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KNOWLES, JAMES W 2812 MANÁTEE AVE. W BRADENTON, FL 34205 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ROWE, JODY A Name: Name: Address: 4416 22ND AVE. W Address: City-St-Zip: BRADENTON, FL 34205 US City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: ROWE, GAIL Name: Address: 4416 22ND AVE. W. Address: City-St-Zip: BRADENTON, FL 34205 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BARR, SCOTT Name: Name: Address: 102 - 1ST ST. N. Address: City-St-Zip: BRADENTON BEACH, FL 34217 US City-St-Zip: () Delete Title: MGRM Title: () Change () Addition BARR, TAMMY

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SCOTT BARR **MGRM** 09/07/2005