2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000078469

1. Entity Name

BAREFOOT PROPERTIES, LLC

Principal Place of Business	Mailing Address
1085 CAPE SAN BLAS ROAD PORT ST. JOE, FL 32456	1085 CAPE SAN BLAS ROAD PORT ST. JOE, FL 32456

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FILED
Apr 05, 2006 08:00 AM
Secretary of State

01312006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
59-3791705	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BLAIR, RACHEL A
1075 CAPE SAN BLAS ROAD
PORT ST. JOE, FL 32456

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2006

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BLAIR, RACHEL A
STREET ADDRESS	1075 CAPE SAN BLAS ROAD
CITY-ST-ZIP	PORT ST. JOE, FL 32456
TITLE	MGRM
NAME	JOHNSON, PATRICIA L
STREET ADDRESS	128 BOARDWALK AVE.
CITY-ST-ZIP	PORT ST. JOE, FL 32456
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
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CITY-ST-ZIP	

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04/19/06-80085-016 50.00

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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: _Rachel Blair_ Rachel Blair   3-29-06   (850) 527-4049

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #