## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000078828

Entity Name: BARTMAN LP17, LLC

**FILED** Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9737 NW 41ST STREET 1865 BRICKELL AVE. - #A 1414

#615 MIAMI, FL 33129 MIAMI, FL 331782924

**New Mailing Address: Current Mailing Address:** 

9737 NW 41ST STREET 1865 BRICKELL AVE. - #A 1414

#615 MIAMI, FL 33129 MIAMI, FL 331782924

FEI Number: 59-3816125 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CABANAS & ASSOCIATES, P.A. 10520 NW 26TH STREET SUITE C-201 DORAL, FL 33172 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: (X) Change ( ) Addition () Delete MANZOLILLO, BARTOLOMEO MANZOLILLO, BARTOLOMEO Name: Name: Address: 10556 NW 26TH ST SUITE D101 Address: 1865 BRICKELL AVE. - # A 1414

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33129 US

Title: MGRM ( ) Delete Title: () Change () Addition

Name: MANZOLILLO, ANUNZIATINA Name: Address: 11223 NW 75TH LANE Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BARTOLOMEO MANZOLILLO **MGRM** 04/30/2009