2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008
Secretary of State

DOCUMENT# L05000086205

Entity Name: BARROWS, WILSON & BRYANT, LLC

Current Principal Place of Business:

902 SAGO PALM WAY
APOLLO BEACH, FL 33572

New Principal Place of Business:

Current Mailing Address:

902 SAGO PALM WAY
APOLLO BEACH, FL 33572

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, ROBERT W
902 SAGO PALM WAY
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

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:

Title: MGRM ( ) Delete
Name: BARROWS, STEVEN P
Address: 16910 EQUESTRIAN TRAIL
City-St-Zip: ODESSA, FL 33556

Title: MGR ( ) Delete
Name: BRYANT, ROBERT L SR.
Address: 11001 FT. KING ROAD
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: BRYANT, BEVERLY
Address: 11001 FT. KING ROAD
City-St-Zip: DADE CITY, FL 33525

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: ROBERT W WILSON RA 02/15/2008

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