2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016151

1314 OLD MY DORA RD

EUSTIS, FL 32726

Address:

City-St-Zip:

Entity Name: BAREFOOT GOURMENT MARKET LLC

FILED Jun 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13491 EARLY FROST CIRCLE ORLANDO, FL 32828 **Current Mailing Address: New Mailing Address:** 252 ARDIRE AVE #320 13491 EARLY FROST CIRCLE EUSTIS, FL 32726 ORLANDO, FL 32828 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () 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: CHRISTIAN, FRANCES L 1314 OLD MT. DORA RD EUSTIS, FL 32726 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: Title: () Change () Addition () Delete VIDAL, SANDRA Name: Name: Address: 13491 EARLY FROST CIRCLE Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: MGR () Delete Title: MGRM (X) Change () Addition PINEDA, BONNIE J Name: Name: VIDAL, EDDIE Address: 1314 OLD MT DORA RD Address: 13491 EARLY FROST CIRCLE City-St-Zip: EUSTIS, FL 32726 City-St-Zip: ORLANDO, FL 32828 Title: MGRM (X) Delete Title: () Change () Addition VIDAL, EDDIE Name: Name: 13491 EARLY FROST CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition Name: PINEDA, DAVID Name:

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.

Address:

City-St-Zip:

SIGNATURE: EDDIE VIDAL MGRM 06/18/2007