

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048724

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: ROCK BARE INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

1421 E GADSDEN STREET  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

1421 E GADSDEN STREET  
PENSACOLA, FL 32501

**New Mailing Address:**

FEI Number: 20-4595805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EVANS, LINTON  
1421 E GADSDEN STREET  
PENSACOLA, FL 32501 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: CANNON, CHRISTINA  
Address: 201 PENSACOLA BEACH RD B26  
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM ( ) Delete  
Name: EVANS, LINTON  
Address: 1421 E GADSDEN STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM ( ) Delete  
Name: COLBURN, HANK  
Address: 1100 RIDGE WAY DR.  
City-St-Zip: CANTONMENT, FL 32533

Title: MGRM ( ) Delete  
Name: WRISLEY, HUNTER  
Address: 3415 EDINBOROUGH CT  
City-St-Zip: PENSACOLA, FL 32514

**ADDITIONS/CHANGES:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LINTON EVANS

MGRM

01/15/2007

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