

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000065355

**FILED**  
**Apr 19, 2007**  
**Secretary of State**

**Entity Name:** BARRIER ISLAND BREVARD ENTERPRISES, LLC

**Current Principal Place of Business:**

1115 HOLLOW BROOK LN  
MALABAR, FL 32950

**New Principal Place of Business:**

**Current Mailing Address:**

1115 HOLLOW BROOK LN  
MALABAR, FL 32950

**New Mailing Address:**

**FEI Number:** 20-5167728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'CONNOR, ANNE T  
1115 HOLLOW BROOK LN  
MALABAR, FL 32950 US

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

OCONNOR-SMITH, ANNE M  
1115 HOLLOW BROOK LN  
MALABAR, FL 32950 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: ANNE M. OCONNOR-SMITH

04/19/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: O'CONNOR, ANNE T  
Address: 1115 HOLLOW BROOK LN  
City-St-Zip: MALABAR, FL 32950

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: OCONNOR-SMITH, ANNE M  
Address: 1115 HOLLOW BROOK LN  
City-St-Zip: MALABAR, FL 32950

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: ANNE M. OCONNOR-SMITH

MGRM

04/19/2007

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