

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000046954

**FILED**  
**Jan 07, 2012**  
**Secretary of State**

**Entity Name:** DESTIN BAREFOOT RENTALS LLC

**Current Principal Place of Business:**

3832 KROELL COVE  
BARTLETT, TN 38135 US

**New Principal Place of Business:**

3832 KROEL COVE  
BARTLETT, TN 38135 US

**Current Mailing Address:**

3832 KROELL COVE  
BARTLETT, TN 38135 US

**New Mailing Address:**

3832 KROEL COVE  
BARTLETT, TN 38135 US

**FEI Number:** 26-3741219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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:** MGR  
**Name:** WILLIAMS, KATHLEEN J  
**Address:** 3832 KROEL COVE  
**City-St-Zip:** BARTLETT, TN 38135 US

**Title:** MGR  
**Name:** WILLIAMS, REBECCA  
**Address:** 3832 KROEL COVE  
**City-St-Zip:** BARTLETT, TN 38135 US

**Title:** P  
**Name:** WILLIAMS, JAMES M  
**Address:** 3832 KROEL CV  
**City-St-Zip:** BARTLETT, TN 38135 US

**Title:** ST  
**Name:** WILLIAMS, RICHARD A  
**Address:** 3832 KROEL CV  
**City-St-Zip:** BARTLETT, TN 38135 US

I hereby 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:** RICHARD A. WILLIAMS

ST

01/07/2012

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