2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# L08000093468

Entity Name: BAR L BAR PROPERTIES, LLC

Current Principal Place of Business:

1750 SOUTH STATE ROAD 415
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

PO BOX 239
OSTEEN, FL 32764

New Mailing Address:

FEI Number: 26-3497087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEFILS, JAMES C
1750 SOUTH STATE ROAD 415
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

LEFILS, JAMES
161 EAST ROSE AVENUE
ORANGE CITY, FL 32763 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: JAMES LEFILS 03/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LEFILS, JAMES C
Address: PO BOX 239
City-St-Zip: OSTEEN, FL 32764

Title: MGRM ( ) Delete
Name: LEFILS, JODY L
Address: PO BOX 239
City-St-Zip: OSTEEN, FL 32764

ADDITIONS/CHANGES:

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 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: JAMES LEFILS MG 03/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date