

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104847

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** INTRACOASTAL BARTER EXCHANGE, LLC

**Current Principal Place of Business:**

11 ZOLLINGER PL  
PALM COAST, FL 32164

**New Principal Place of Business:**

802 LUCERNE CIRCLE  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

PO BOX 1137  
FLAGLER BEACH, FL 32136

**New Mailing Address:**

802 LUCERNE CIRCLE  
ORMOND BEACH, FL 32174

**FEI Number:** 27-2665135

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUBER, CARL L II  
11 ZOLLINGER PL  
PALM COAST, FL 32164 US

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

HUBER, CARL L II  
802 LUCERNE CIRCLE  
ORMOND BEACH, FL 32174 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:

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HUBER, COREEN D  
Address: 802 LUCERNE CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM  
Name: HUBER, CARL II  
Address: 802 LUCERNE CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

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: COREEN HUBER

MGR

05/01/2012

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