

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

FILED
Feb 05, 2008 8:00 am
Secretary of State

02-05-2008 90028 022 ***138.75

DOCUMENT # L98000001204
 1. Entity Name
 BARRINGTON INVESTMENT GROUP, LLC



Principal Place of Business Mailing Address
 1 LONGFELLOW PLACE 1 LONGFELLOW PLACE
 APT 1921 APT 1921
 BOSTON MA 02114 BOSTON MA 02114



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 616 Clearwater Park Rd. 616 Clearwater Park Rd.
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 #1011 #1011

1st MOORE CR2E083 (10/07)

City & State City & State
 W. Palm Beach, FL W. Palm Beach, FL
 Zip Country Zip Country
 33401 USA 33401 USA

4. FEI Number 04-3427869 Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROSE, JON E
 % CHARLES WAYNE PROPERTIES
 2300 MAITLAND CENTER PARKWAY, SUITE 306
 MAITLAND FL 32751

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and fee applicable (NOTE: Registered Agent signature required when registering)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	STANZLER, ALAN L	
STREET ADDRESS	1 LONGFELLOW PLACE APT 1921	
CITY-ST-ZIP	BOSTON MA 02114	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS / CHANGES

TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stanzler, Alan L	
STREET ADDRESS	616 Clearwater Park Rd, #1011	
CITY-ST-ZIP	W. Palm Beach, FL 33401	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 808, Florida Statutes.

SIGNATURE: Alan L Stanzler Date: 1/28/08 Daytona Pwrc # 6178033020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE