

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L99000006281

1. Entity Name
BARROW-CIMARRON LLC



FILED
Apr 26, 2007 08:00 AM
Secretary of State

Principal Place of Business
3800 WEST BAY TO BAY BLVD
STE 21
TAMPA, FL 33629

Mailing Address
3800 WEST BAY TO BAY BLVD
STE 21
TAMPA, FL 33629



02202007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3604829

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBBINS JR, R. JAMES
101 EAST KENNEDY BLVD., STE 3700
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BARROW, ALSTON M
STREET ADDRESS	3800 WEST BAY TO BAY BLVD., STE. 21
CITY-ST-ZIP	TAMPA, FL 33629

TITLE	
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U000000734648
05/10/07-80002-007 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 608, Florida Statutes

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-19-07