2007 LIMITED LIABILITY COMPANY

the obligations of registered agent.

SIGNATURE.

ANNUAL REPORT DOCUMENT # L99000006849 1. Entity Name BARRIER ISLANDS GIRL, L.L.C. Principal Place of Business Mailing Address 13710 ROBERT ROAD P.O. BOX 403 PINELAND, FL 33945 PINELAND, FL 33945 US 01232007 No Chg-LLC DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent LUDICK, EMILY A 13710 ROBERT ROAD PINELAND, FL 33945

FILED Apr 16, 2007 08:00 Al Secretary of State



CR2E083 (11/05)

4. FEI Number	 Applied For
	
65-0957959	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

DO NOT WRITE IN THIS SPACE

	Signature, typed or printed rights and agent and the mappingade.	(14C) E. Registared Agent signature requise whom reinstating)	DATE	
F. D	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUDICK, EMILY A 13710 ROBERT ROAD PINELAND, FL 33945			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000712112 04/26/07-80015-007 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature subility company or the receiver or trustee empowered to exe	qualify for the exemptions contained in Chapter 11 half have the same legal effect as if made under o cute this report as required by Chapter 608. Florid	Florida Statutes. I further certify that the information all; that I am a managing member or manager of the a Statutes.	

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

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