


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P03000099275 |  |
| 1. Entity Name BARNES BAIL BONDS AGENCY, INC. | |

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| Principal Place of Business 1711 N 25 ST STE A FT PIERCE, FL 34947 | Mailing Address 1711 N 25 ST STE A FT PIERCE, FL 34947 |
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DO NOT WRITE IN THIS SPACE



03292007 No Chg-P CR2E034 (11/05)

| | |
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| 4. FEI Number 14-1895615 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent |
| BARNES, CLIFFORD 1711 N 25 ST STE A FT PIERCE, FL 34947 |

**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 _____ (NOTE: Registered Agent signature required when re-statuting) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | 100000685007 04/06/07-80056-001 150.00 |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | P BARNES, CLIFFORD 1711 N 25 ST STE A FT PIERCE, FL 34947 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | V BARNES, BETTY J 1711 N 25 ST STE A FT PIERCE, FL 34947 |
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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Clifford Barnes* **3-29-07 772-464-2387**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-Mo-Year