2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 12, 2007 8:00 am Secretary of State

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DOCUMENT # P18	3797
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Principal Place of Business

905 TURNBUCKLE TRAIL

PENSACOLA, FL 32507 US

BARNES/WEST PRODUCTIONS, INC.



Mailing Address

905 TURNBUCKLE TRAIL

PENSACOLA, FL 32507-4467 US

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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

1 (88/1841 (8) (TEST ITM ISTIN IURI	IREN BIRTH ELER CITH EIGH CITH TITMEN B 1912.
01042007	No Chg-P	CR2E034 (11/05)

4. FEI Number		Applied For
42-1193268		Not Applicable
5. Certificate of Status Desire	× 🗆	\$8.75 Additional

8. The above named entity subdits 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

BARNES, DAVID C.	
905 TURNBUCKLE TRA	Ų
PENSACOLA, FL 32507	۲
7	,

SIGNATURE: _>

DO NOT WRITE IN THIS SPACE

8. The above named entity substitis 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, typad or principli name or registered against and one if appacable (NOTE: Registered Again signature required when renationg) DATE					
	E NOWIII FEE IS \$150.00 by 1, 2007 Fee will be \$550.00	Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARNES, DAVID C. 905 TURNBUCKLE TRAIL PENSACOLA, FL 32507				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BARNES, SUSAN 905 TURNBUCKLE TRAIL PENSACOLA, FL 32507				
TITLE HAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
-TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- "			
TITLE NAME STREET ADDRESS CITY-S1-ZIP					
12. I hereby certify that the information supplied with this tiling 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 eath; 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.					