


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000091281</b> 1. Entity Name <b>BARRIER ISLAND INVESTMENTS, INC.</b>	
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Principal Place of Business <b>11328 BUSINESS PARK BLVD JACKSONVILLE, FL 32256</b>	Mailing Address <b>P O BOX 877 PONTE VERDE BEACH, FL 32004-0877</b>
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**DO NOT WRITE IN THIS SPACE**



01072008 No Chg-P CR2E034 (11/05)


4. FEI Number <b>59-3546429</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**NOE, WILLIAM G JR  
599 ATLANTIC BLVD STE 6  
ATLANTIC BEACH, FL 32233**

**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  DATE 1/7/2008

(Signature, typed or printed name of registered agent and this if applicable. NOTE: Registered Agent signature required when reinstating.)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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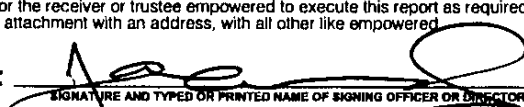
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD OLDHAM, JOHN R P.O. BOX 877 PONTE VEDRA BEACH, FL 32004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:  DATE 1/7/2008 (904) 260-7770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR