	., 0_00. 00			
FEI Number: 61-1433455			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
BARNES, WALT 4640 PEACOCK PENSACOLA, F	DR.			
The above named	entity submits this statement for the purpose of changing its re-	gistered office or regis	tered agent, or both, in the State of F	Florida.
SIGNATURE	: WALTER W. BARNES			04/25/2015
	Electronic Signature of Registered Agent			Date
Authorized F	Person(s) Detail :			
Title	MGR	Title	SECRETARY	
Name	BARNES, WALTER W	Name	ARRANT, LAURA J.	
Address	4640 PEACOCK DR.	Address	4640 PEACOCK DR.	
City-State-Zip:	PENSACOLA FL 32504	City-State-Zip:	PENSACOLA FL 32504	

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WALTER W. BARNES

MGR.

04/25/2015

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000122943

Entity Name: WALTER W BARNES LLC

Current Principal Place of Business:

4640 PEACOCK PENSACOLA, FL 32504

Current Mailing Address:

4640 PEACOCK DR. PENSACOLA, FL 32504 US

FILED Apr 25, 2015 **Secretary of State** CC3819890640

Electronic Signature of Signing Authorized Person(s) Detail