## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000179985

Entity Name: THE BARNARD TEAM, LLC

**Current Principal Place of Business:** 

809 HIGHPOINT DRIVE PORT ORANGE, FL 32127

**Current Mailing Address:** 

809 HIGHPOINT DRIVE

PORT ORANGE. FL 32127 US

FEI Number: 47-2368286 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARNARD, LLOYD G JR. 809 HIGHPOINT DRIVE PORT ORANGE, FL 32127 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Apr 26, 2016

**Secretary of State** 

CC6337155443

Authorized Person(s) Detail:

Title MGR Title AUTHORIZED MEMBER BARNARD, LLOYD G JR. MOORE, TRENTON Name Name 809 HIGHPOINT DRIVE Address 809 HIGHPOINT DRIVE Address City-State-Zip: PORT ORANGE FL 32127 PORT ORANGE FL 32127 City-State-Zip:

Title AUTHORIZED MEMBER Title AUTHORIZED MEMBER, TREASURER Name TABORDA, STEVE Name MATEVIA, MEGAN Address 809 HIGHPOINT DRIVE Address 809 HIGHPOINT DRIVE PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32127 City-State-Zip:

Title AUTHORIZED MEMBER, VP

Name GAGNON, EDWARD 809 HIGHPOINT DRIVE Address City-State-Zip: PORT ORANGE FL 32127

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.

**MGR** 

SIGNATURE: LLOYD BARNARD

Electronic Signature of Signing Authorized Person(s) Detail

04/26/2016

Date