

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081633

FILED
Jun 02, 2009
Secretary of State

Entity Name: BAKER REAL ESTATE, LLC

Current Principal Place of Business:

3684 W. WADE HAMPTON COURT
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

3684 W. WADE HAMPTON COURT
LECANTO, FL 34461 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GARAVAGLIA, MICHAEL J
756 BEACHLAND BOULEVARD
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAKER, PAT
Address: 3684 W. WADE HAMPTON COURT
City-St-Zip: LECANTO, FL 34461 US

Title: P () Delete
Name: BAKER, PAT
Address: 3684 W. WADE HAMPTON COURT
City-St-Zip: LECANTO, FL 34461 US

Title: VP () Delete
Name: YORK, JAMES D
Address: 1870 COBIA DR
City-St-Zip: VERO BEACH, FL 32960 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PAT BAKER

MGRM

06/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date