

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 580597

FILED
Jan 13, 2009
Secretary of State

Entity Name: RICHARD D. BARKER, INC.

Current Principal Place of Business:

4555 SAN JUAN AVE.
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

4452 MCGIRTS BV.
JACKSONVILLE, FL 32210 US

Current Mailing Address:

4555 SAN JUAN AVE.
JACKSONVILLE, FL 32210 US

New Mailing Address:

4452 MCGIRTS BV.
JACKSONVILLE, FL 32210 US

FEI Number: 59-1851608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKER, J MICHAEL
4555 SAN JUAN AVE.
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

BARKER, JON M MR.
4452 MCGIRTS BV
JACKSONVILLE, FL 32210 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: J. MICHAEL BARKER

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARKER, J. MICHAEL,
Address: 4452 MCGIRTS BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: SD () Delete
Name: BARKER, CLAUDETTE C
Address: 4452 MCGIRTS BLVD
City-St-Zip: JACKSONVILLE, FL

Title: VPD () Delete
Name: BARKER, RICHARD D. JR.
Address: 4452 MCGIRTS BLVD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. MICHAEL BARKER

PD

01/13/2009

Electronic Signature of Signing Officer or Director

Date