

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000004058

Entity Name: BARKEN, LLC

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

333 FALKENBURG ROAD N, UNIT B-206  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

333 FALKENBURG ROAD, UNIT B-206  
TAMPA, FL 33619

**New Mailing Address:**

FEI Number: 59-3641820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOSTER, BARBARA J  
333 FALKENBURG ROAD N, UNIT B-206  
TAMPA, FL 33619 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: MGR  
Name: FOSTER, KENNETH P  
Address: 333 FALKENBURG ROAD N, UNIT B-206  
City-St-Zip: TAMPA, FL 33619

Title: MGR  
Name: FOSTER, BARBARA J  
Address: 333 FALKENBURG ROAD N, UNIT B-206  
City-St-Zip: TAMPA, FL 33619

I hereby 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: BARBARA J. FOSTER

M

02/01/2010

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