

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000004058

Entity Name: BARKEN, LLC

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

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

**Current Mailing Address:**

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

**New Mailing Address:**

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

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:**

FOSTER, BARBARA J  
333 FALKENBURG ROAD N  
UNIT B-206  
TAMPA, FL 33619 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:

04/18/2011

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

SEC

04/18/2011

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