

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031129

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: FORM WORKS/BAKER JV, LLC

## Current Principal Place of Business:

8321 N.W. 90TH STREET  
MEDLEY, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

900 N GARVER RD  
MONROE, OH 45050

## New Mailing Address:

FEI Number: 42-1562305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUNNOE, JULIAN  
4951 SW 34TH PLACE  
FORT LAUDERDALE, FL 33314 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 ( ) Delete  
Name: MARKS, DONALD M  
Address: 8321 N.W. 90TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: MGR ( ) Delete  
Name: HEATH, KENNETH  
Address: 8321 N.W. 90TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: MGR ( ) Delete  
Name: GRIESHABER, JOHN  
Address: 8321 N.W. 90TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: MGR ( ) Delete  
Name: ORR, JOSEPH  
Address: 8321 N.W. 90TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: MGR ( ) Delete  
Name: FAYER, GARY  
Address: 8321 N.W. 90TH STREET  
City-St-Zip: MEDLEY, FL 33166

Title: MGR ( ) Delete  
Name: MARTIN, STEVE  
Address: 900 N GARVER RD  
City-St-Zip: MONROE, OH 45050

## 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:

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: STEVE MARTIN

MGR

01/22/2009

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