

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**7. Aug 09, 2005 8:00 am
Secretary of State**

07-14-2005 90018 009 ****55.00

DOCUMENT # L03000040567

1. Entity Name

BAKER REAL ESTATE BROKERAGE FIRM LLC



Principal Place of Business
6855 REMINGTON VIEW CT.
ORLANDO, FL 32829

Mailing Address
6855 REMINGTON VIEW CT.
ORLANDO, FL 32829

30010530



DO NOT WRITE IN THIS SPACE

07112005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
05-0591776

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

BAKER, JERÔME
6855 REMINGTON VIEW CT.
ORLANDO, FL 32829

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BAKER, SABRINA
6855 REMINGTON VIEW CT.
ORLANDO, FL 32829

TITLE
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CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

8/1/05