


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 11, 2006 8:00 am**  
**Secretary of State**

08-11-2006 90090 011 \*\*\*\*50.00

<b>DOCUMENT # L04000088898</b> 1. Entity Name BAKERS AND COOKS, LLC	
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Principal Place of Business 5038 S.E. 6TH AVE. OCALA, FL 34480	Mailing Address 5038 S.E. 6TH AVE. OCALA, FL 34480
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**DO NOT WRITE IN THIS SPACE**



08082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1985281	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BELDEN, GENE 5038 S.E. 6TH AVE. OCALA, FL 34480
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**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.

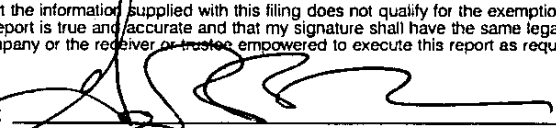
SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**Filing Fee is \$50.00  
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BELDEN, GENE 5038 S.E. 6TH AVE. OCALA, FL 34480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BELDEN, MARIE 5038 S.E. 6TH AVE. OCALA, FL 34480
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**  **8-9-2006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #