

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088898

Entity Name: BAKERS AND COOKS, LLC

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

5038 S.E. 6TH AVE.
OCALA, FL 34480

New Principal Place of Business:

128 SW BROADWAY STREET
OCALA, FL 34471

Current Mailing Address:

5038 S.E. 6TH AVE.
OCALA, FL 34480

New Mailing Address:

128 SW BROADWAY STREET
OCALA, FL 34471

FEI Number: 20-1985281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELDEN, GENE
5038 S.E. 6TH AVE.
OCALA, FL 34480 US

Name and Address of New Registered Agent:

BELDEN, GENE R MGRM
5038 S.E. 6TH AVE.
OCALA, FL 34480 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: GENE R. BELDEN

01/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BELDEN, GENE
Address: 5038 S.E. 6TH AVE.
City-St-Zip: OCALA, FL 34480

Title: MGRM () Delete
Name: BELDEN, MARIE
Address: 5038 S.E. 6TH AVE.
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BELDEN, GENE R
Address: 5038 S.E. 6TH AVE.
City-St-Zip: OCALA, FL 34480

Title: MGRM (X) Change () Addition
Name: HARRINGTON, MARIE G
Address: 5038 S.E. 6TH AVE.
City-St-Zip: OCALA, FL 34480

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: GENE R. BELDEN

MGRM

01/08/2008

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