

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069987

FILED
May 11, 2009
Secretary of State

Entity Name: THOMAS BARKER DRYWALL, LLC

Current Principal Place of Business:

3030 MARQUES ST
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

3030 MARQUES ST
PENSACOLA, FL 32505 US

New Mailing Address:

FEI Number: 20-3301498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BARKER, THOMAS
3030 MARQUES ST
PENSACOLA, FL 32505 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: MGRM () Delete
Name: BARKER, THOMAS
Address: 3030 MARQUES ST
City-St-Zip: PENSACOLA, FL 32505 US

Title: MGR (X) Delete
Name: WELCH, LONNIE E
Address: 1700 NORTH L ST. APT 509
City-St-Zip: PENSACOLA, FL 32501 US

Title: MGR (X) Delete
Name: CAPPERS, CHARLIE C
Address: 9880 REBEL RD
City-St-Zip: PENSACOLA, FL 32526 US

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:

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: THOMAS BARKER

MGRM

05/11/2009

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