

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 17, 2009
Secretary of State**

DOCUMENT# L06000023418

Entity Name: DAVID W. BAKER & ASSOCIATES, LLC

Current Principal Place of Business:

1427 CAPRI LANE
#5012
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1427 CAPRI LANE
#5012
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 20-4426751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33327 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: BAKER, DAVID W
Address: 1427 CAPRI LANE, #5012
City-St-Zip: WESTON, FL 33326

Title: MGMR () Delete
Name: BAKER, NANCY E
Address: 1427 CAPRI LANE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

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: DAVID W. BAKER

MGRM

01/17/2009

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