

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005677

FILED
May 25, 2009
Secretary of State

Entity Name: LIBERTY BAKERY LLC

Current Principal Place of Business:

2781 WRIGHTS ROAD
SUITE 1229
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

2781 WRIGHTS ROAD
SUITE 1229
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 20-8242181 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:

Name and Address of New Registered Agent:

SOLLIE, SHEILA A
2408 SHEFFIELD AVENUE
ORLANDO, FL 32806 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOLLIE, SHEILA A
Address: 2408 SHEFFIELD AVENUE
City-St-Zip: ORLANDO, FL 32806 US

Title: MGRM () Delete
Name: COSTANZO, LAURA
Address: 12953 ODYSSEY LAKE WAY
City-St-Zip: ORLANDO, FL 32826 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: COSTANZO, LAURA
Address: 10117 EASTERN LAKE AVE #102
City-St-Zip: ORLANDO, FL 32817 US

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: SHEILA A. SOLLIE

MGRM

05/25/2009

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