

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000066093

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** BARBARA SABER WILLIS, M.A. LLC

**Current Principal Place of Business:**

3910 NORTHDAL BLVD.  
208  
TAMPA, FL 33624 US

**New Principal Place of Business:**

**Current Mailing Address:**

19515 DEER LAKE ROAD  
LUTZ, FL 33548 US

**New Mailing Address:**

**FEI Number:** 26-0418257      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SABER WILLIS, BARBARA  
19515 DEER LAKE ROAD  
LUTZ, FL., FL 33548 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  
**Name:** SABER WILLIS, BARBARA  
**Address:** 19515 DEER LAKE ROAD  
**City-St-Zip:** LUTZ, FL 33624 HI

I hereby 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: BARBARA SABER WILLIS      MGRM      02/18/2010

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