## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121195

Entity Name: BAY AREA FIELD SERVICES, "LLC"

FILED Jun 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

601 CAROLINA AVE. 11555 GULF BLVD.

PLANT CITY, FL 33563 113

TREASURE ISLAND, FL 33706

Current Mailing Address: New Mailing Address:

601 CAROLINA AVE. P.O. BOX 66081

PLANT CITY, FL 33563 ST. PETE BEACH, FL 33736

FEI Number: 42-1750059 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:

BROWN, TIMOTHY M
TIMOTHY M. BROWN
601 CAROLINA AVE., FL 33563 US

BROWN, TIMOTHY M
11555 GULF BLVD
113

601 CAROLINA AVE., FL 33563 US 113 TREASURE ISLAND, FL 33706 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: TIMOTHY M. BROWN 06/06/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name:BROWN, TIMOTHY MName:BROWN, TIMOTHY MAddress:601 CAROLINA AVE.Address:11555 GULF BLVD. #113City-St-Zip:PLANT CITY, FL 33563City-St-Zip:TREASURE ISLAND, FL 33706

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: TIMOTHY M. BROWN MGR 06/06/2009