

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021971

**FILED**  
**Apr 27, 2009**  
**Secretary of State**

**Entity Name:** BOB BARKER COMPUTER SOLUTIONS LLC

**Current Principal Place of Business:**

13504 PARK LAKE DRIVE  
APT 101  
TAMPA, FL 33618 US

**New Principal Place of Business:**

9702 MONTAGUE ST  
TAMPA, FL 33626 US

**Current Mailing Address:**

1134 PINETREE DRIVE  
INDIAN HARBOUR BEACH, FL 32937 US

**New Mailing Address:**

FEI Number: 26-2090029      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BARKER, ROBERT L  
1134 PINETREE DRIVE  
INDIAN HARBOUR BEACH, FL 32937 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: MGR ( ) Delete  
Name: BARKER, ROBERT L  
Address: 13504 PARK LAKE DRIVE APT 101  
City-St-Zip: TAMPA, FL 33618 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BARKER, ROBERT L  
Address: 9702 MONTAGUE ST  
City-St-Zip: TAMPA, FL 33626 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: ROBERT BARKER

MGR

04/27/2009

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