

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095064

FILED
Apr 22, 2009
Secretary of State

Entity Name: BAUGH'S TAX & ACCOUNTING SERVICES, LLC

Current Principal Place of Business:

1786 NW 165TH AVENUE
PEMBROKE PINES, FL 33028

New Principal Place of Business:

14304 SW 11TH STREET
PEMBROKE PINES, FL 33027

Current Mailing Address:

1786 NW 165TH AVENUE
PEMBROKE PINES, FL 33028

New Mailing Address:

14304 SW 11TH STREET
PEMBROKE PINES, FL 33027

FEI Number: 26-3501184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUGH, ADRIAN
1786 NW 165TH AVENUE
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

BAUGH, ADRIAN
14304 SW 11TH STREET
PEMBROKE PINES, FL 33027 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: _____

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAUGH, ADRIAN
Address: 1786 NW 165TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM (X) Delete
Name: BAUGH, EMMANUELLE
Address: 1786 NW 165TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BAUGH, ADRIAN
Address: 14304 SW 11TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

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: ADRIAN BAUGH

MGRM

04/22/2009

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