

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0004720 AV

DOCUMENT # A02000000999



1. Entity Name
CARRABBA'S/LEXINGTON, LIMITED PARTNERSHIP

FILED

2003 FEB -6 AM 9:51

**DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**



Principal Place of Business 2202 NORTH WESTSHORE BLVD., 5TH FLOOR TAMPA FL 33607	Mailing Address 2202 NORTH WESTSHORE BLVD., 5TH FLOOR TAMPA FL 33607
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 04-3706233	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KADOW, JOSEPH J
2202 NORTH WESTSHORE BLVD., 5TH FLOOR
TAMPA FL 33607**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$25,000.00	10. Amount of Capital Contributions in FLORIDA to date. 25,000	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P95000003626	STREET ADDRESS	
NAME	CARRABBA'S ITALIAN GRILL, INC.	CITY-ST-ZIP	
STREET ADDRESS	2202 NORTH WESTSHORE BLVD., 5TH FLOOR		
CITY-ST-ZIP	TAMPA FL 33607		
DOCUMENT #	B02000000257	STREET ADDRESS	100011904031
NAME	RCF/LEXINGTON, L.P.	CITY-ST-ZIP	02/06/03--01029--006 **272.50
STREET ADDRESS	636 GOOD SPRINGS RD.		
CITY-ST-ZIP	BRENTWOOD TN 37027		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE REQUIRED *Joseph J. Kadow, Secretary* 1/22/03 (813) 282-1225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER of Carrabba's Italian Date Daytime Phone #

CR2E003 (10/02)