


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90030 017 ****50.00

DOCUMENT # L05000020489

1. Entity Name
CHAFFEE BBQ, LLC



Principal Place of Business
2605 SW 33RD STREET, #200
OCALA, FL 34474

Mailing Address
2605 SW 33RD STREET, #200
OCALA, FL 34474

DO NOT WRITE IN THIS SPACE



03282007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2418420	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KIRKPATRICK, JOHN W III
2605 SW 33RD STREET, #200
OCALA, FL 34474

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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. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KIRKPATRICK, JOHN W III 2605 SW 33RD STREET, #200 OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Kirkpatrick, Kenneth B 2605 SW 33rd St #200 Ocala FL 34474
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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: *Kenneth B Kirkpatrick* **Kenneth B Kirkpatrick** 4/10/07 352-620-2514
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #