

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 237225**

1. Entity Name

FAT BOYS' BAR-B-Q, INC.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90108 038 ***150.00

Principal Place of Business

Mailing Address

6006 N. Atlantic Ave.
Cape Canaveral, FL 32920

2. Principal Place of Business

356 BARRELLO LANE

Suite, Apt. #, etc.

3. Mailing Address

356 BARRELLO LANE

Suite, Apt. #, etc.

City & State

COCOA BEACH FL

City & State

COCOA BEACH FL

4. FEI Number

59-0902658

Applied For

Not Applicable

Zip

32931-3664

Country

BREVARD

Zip

32931-3664

Country

BREVARD

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

6. Name and Address of Current Registered Agent

Davis, Mary E.
6006 N. Atlantic Ave.
Cape Canaveral, FL 32920

7. Name and Address of New Registered Agent

Name
JEANNE WILSONStreet Address (P.O. Box Number is Not Acceptable)
356 BARRELLO LANECity
COCOA BEACHFL Zip Code
32931-3664

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.

SIGNATURE

*Jeanne D. Wilson*JEANNE WILSON
SECT/TREA

APRIL 3 2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME Davis, Mary E.
STREET ADDRESS 6006 N. Atlantic Ave.
CITY-ST-ZIP Cape Canaveral, FL 32920TITLE ST ☐ Delete
NAME Wilson, Jeanne
STREET ADDRESS 6006 N. Atlantic Ave.
CITY-ST-ZIP Cape Canaveral, FL 32920TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 356 BARRELLO LANE
CITY-ST-ZIP COCOA BEACH FL 32931-3664TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

JEANNE D WILSON

SECT/TREA

APRIL 3 2001

321/783-6496

SIGNATURE:

Jeanne D. Wilson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)