

2002 UNIFORM BUSINESS REPORT (UBR)

0004761 AV

DOCUMENT # A96000001712

1. Entity Name
J. RYAN'S ON THE GRILL, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

WL
5/14

02 MAY -2 PM 3: 59



Principal Place of Business
8389 S. TAMiami TRAIL
SARASOTA FL 34238-2935

Mailing Address
1834 MAIN ST.
SARASOTA FL 34236

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DUE BY MAY 1, 2002

4. FEI Number 65-0697284
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
BENDER, HARRY K
5915 PONCE DE LEON BLVD., 6TH FLOOR
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent
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.

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

9. Capital Contributions as Shown on record. \$300,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CHANDLER, JAMES R III 3851 TANGIER TERRACE SARASOTA FL 34239
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BONFRERE, NICHOLAS 7535 CALLE FACIL SARASOTA FL 34238
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GONZALEZ, RAFAEL 3185 NOVUS COURT SARASOTA FL 34237
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L96000000972 WINDEMERE WEST, L.C. 128 MAIN ST. OSPREY FL 34229
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700005555127--2
CITY-ST-ZIP	05/16/02 01054 010 ***526.25 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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]* **4/30/02** **741 9511503**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)