

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2003 8:00 am
Secretary of State

03-25-2003 90070 016 ***150.00

DOCUMENT # **F02000003168**



1. Entity Name
MACKNIGHT SMOKED FOODS, INC.

Principal Place of Business
**C/O FCP INVESTORS, INC.
601 NORTH ASHLEY DRIVE, 5TH FLOOR
TAMPA FL 33602**

Mailing Address
**C/O FCP INVESTORS, INC.
601 NORTH ASHLEY DRIVE, 5TH FLOOR
TAMPA FL 33602**



2. Principal Place of Business
10150 Highland Manor Dr
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Tampa, FL
Zip
33610

City & State
Zip

Country
USA

4. FEI Number
04-3686114 **APPLIED FOR**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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 William L. Byers
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	WONG, FELIX J	601 NORTH ASHLEY DRIVE, 5TH FLOOR	TAMPA FL 33602	<input type="checkbox"/>
	FRANZ, PETER B	601 NORTH ASHLEY DRIVE, 5TH FLOOR	TAMPA FL 33602	<input type="checkbox"/>
	Brett Milligan	10150 Highland Manor Dr	Tampa, FL 33610	<input type="checkbox"/>
	William Byers	10150 Highland Manor Dr	Tampa, FL 33610	<input type="checkbox"/>
	Math Young	601 North Ashley Dr, 5th Floor	Tampa, FL 33602	<input type="checkbox"/>
	Jeffrey Heck	601 North Ashley Dr, 5th Floor	Tampa, FL 33602	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William L. Byers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/18/03

CR2E034 (10/02)