

# 2002 UNIFORM BUSINESS REPORT (UBR)

0036203

DOCUMENT # L01000001658

1. Entity Name

BONEFISH GRILL OF SAFETY HARBOR, LLC

FILED

02 MAY -1 AM 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

5901 FOURTH STREET NORTH  
ST. PETERSBURG FL 33703-1417

Mailing Address

5901 FOURTH STREET NORTH  
ST. PETERSBURG FL 33703-1417

2. Principal Place of Business

2202 North West Shore Blvd. 2202 North West Shore Blvd.

Suite, Apt. #, etc.

5th Floor

3. Mailing Address

Suite, Apt. #, etc.

5th Floor

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33607

Country

Zip

33607

Country

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL AN  
501 E. KENNEDY BLVD, SUITE 1700  
ATTN: SCOTT P. ANDREW  
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Kelly M. Braun

Street Address (P.O. Box Number is Not Acceptable)

2202 North West Shore Blvd., 5th Floor

City

TAMPA, FLORIDA 33607

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State  
Due By May 1, 2002

100005537981--1

-05/15/02--01064--001

\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MANAGERS

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10.

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR John W. Cooper  
2202 North West Shore Blvd., 5th Floor  
Tampa, FL 33607

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR Robert D. Basham  
2202 North West Shore Blvd., 5th Floor  
Tampa, FL 33607

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR Robert S. Merritt  
2202 North West Shore Blvd., 5th Floor  
Tampa, FL 33607

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR Christopher L. Parker  
184 97th Ave., N.E.  
St. Petersburg, FL 33702

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR Timothy V. Curci  
2946 Hadleigh  
Clearwater, FL 34621

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E03 (9/01)