

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008162

Entity Name: COWGIRL KITCHEN, LLC

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

4281 E. HWY C-30A
SEAGROVE BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

258 HILLCREST RD.
SEAGROVE BEACH, FL 32459

New Mailing Address:

4281 E HWY C30-A
SEAGROVE BEACH, FL 32459

FEI Number: 59-2320761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARBOROUGH, NANCY D
258 HILLCREST RD.
SEAGROVE BEACH, FL 32459 US

Name and Address of New Registered Agent:

SCARBOROUGH, NANCY D
4281 E HWY C30-A
SEAGROVE BEACH, FL 32459 US

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:

04/22/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SCARBOROUGH, NANCY D
Address: 51 HOLLY STREET
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: MGRM () Delete
Name: DUPRE, ADA M
Address: 51 HOLLY STREET
City-St-Zip: SEAGROVE BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCARBOROUGH, NANCY D
Address: 340 BARBER
City-St-Zip: WIMBERLEY, TX 78676

Title: MGRM (X) Change () Addition
Name: DUPRE, ADA M
Address: 340 BARBER
City-St-Zip: WIMBERLEY, TX 78676

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: NANCY D SCARBOROUGH

MM

04/22/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date