

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010458

Entity Name: DEEP SOUTH BARBECUE LLC

FILED
Jan 03, 2006
Secretary of State

Current Principal Place of Business:

ROYAL PALM CORPORATE CENTER
1520 ROYAL PALM SQ. BLVD., STE. 320
FORT MYERS, FL 33919

New Principal Place of Business:

1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919

Current Mailing Address:

ROYAL PALM CORPORATE CENTER
1520 ROYAL PALM SQUARE BLVD., STE. 320
FORT MYERS, FL 33919

New Mailing Address:

1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919

FEI Number: 20-0713377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, BRUCE D
ROYAL PALM CORPORATE CENTER
1520 ROYAL PALM SQUARE BLVD., STE. 320
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

GREEN, BRUCE D
1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 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: BRUCE D. GREEN

01/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GREEN, BRUCE D
Address: 1520 ROYAL PALM SQUARE BLVD., STE. 320
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GREEN, BRUCE D
Address: 1380 ROYAL PALM SQUARE BOULEVARD
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRUCE D. GREEN

MGRM

01/03/2006

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