## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L04000036050

1. Entity Name

RICK'S CABANA LOUNGE, L.L.C.



Principal Place of Business

Mailing Address

7164 NORTH 9TH AVENUE PENSACOLA, FL 32504 7164 NORTH 9TH AVENUE PENSACOLA, FL 32504 FILED Jan 22, 2008 08:00 AN Secretary of State



01042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-1118178		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional autred

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6. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

REDDICK, JAMES H 207 SOUTH BAYLEN STREET PENSACOLA, FL 32501 DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOWIII FEE IS \$138,75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES JOHNSTON, RICHARD W MR. 427 TURNBERRY ROAD PENSACOLA, FL 32533		U00000791067	
TITLE NAME STREET ADDRESS CITY+ST-ZIP			01/23/08-80059-010 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		in.	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.				

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE