

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000047697

FILED
May 01, 2009
Secretary of State**Entity Name:** GATOR JOE'S, LLC**Current Principal Place of Business:**1553 SE FT. KING STREET
OCALA, FL 34471**New Principal Place of Business:****Current Mailing Address:**1553 SE FT. KING STREET
OCALA, FL 34471**New Mailing Address:****FEI Number:** 20-2903554**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOONE, KIRK
1553 SE FT. KING STREET
OCALA, FL 34471 US**Name and Address of New Registered Agent:**

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:_____
Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:****Title:** MGR () Delete
Name: BOONE, KIRK
Address: 1553 SE FT. KING STREET
City-St-Zip: Ocala, FL 34471**Title:** MGR () Delete
Name: MCBRIDE, SANDY
Address: 1553 SE FORT KING ST
City-St-Zip: Ocala, FL 34471**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SANDY MCBRIDE

MGR

05/01/2009

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