

# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

2008 OCT 21 PM 12:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L06000073940

1. Entity Name  
BROADWAY COFFEE AND TEA CO., LLC



Principal Place of Business  
2126 W LANDSTREET ROAD  
ORLANDO, FL 32809

Mailing Address  
2126 W LANDSTREET ROAD  
ORLANDO, FL 32809

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09272008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
20-5274575

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DULIN, RAMSEY W  
201 EAST PINE STREET  
425 CAPITAL PLAZA  
ORLANDO, FL 32801

Name

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

City

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. 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

Amended AR is \$50.00

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☒ Delete  
NAME BARNIE'S II, INC  
STREET ADDRESS 2126 W LANDSTREET ROAD  
CITY-ST-ZIP ORLANDO, FL 32809

TITLE MGR ☐ Change ☒ Addition  
NAME B. Philip Jones, Jr.  
STREET ADDRESS 2126 W. Landstreet Road  
CITY-ST-ZIP Orlando, FL 32809

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Change ☒ Addition  
NAME James H. Pugh, Jr.  
STREET ADDRESS 2126 W. Landstreet Road  
CITY-ST-ZIP Orlando, FL 32809

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000137132680  
10/21/08--01026--008 \*\*400.00

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 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.

SIGNATURE:

*B. Philip Jones, Jr.*

B. Philip Jones, Jr.-MGR

407/854-6600

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

Date

Daytime Phone #