

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094597

Entity Name: CHUCK'S WAGON LLC

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

60 EAST MAIN ST
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

60 EAST MAIN ST
APOPKA, FL 32703

New Mailing Address:

FEI Number: 20-5586103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BENHAM, CHARLES
Address: 1221 MAVERICK DR.
City-St-Zip: APOPKA, FL 32703

Title: MGRM () Delete
Name: BENHAM, DONNA
Address: 1221 MAVERICK DR.
City-St-Zip: APOPKA, FL 32703

Title: MGRM () Delete
Name: BENHAM, CHARLES II
Address: 1221 MAVERICK DR.
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES BENHAM

MGRM

05/05/2009

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