

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060132

FILED
Apr 29, 2008
Secretary of State

Entity Name: JP'S BAR-B-QUE FD-23, LLC

Current Principal Place of Business:

13180 NORTH CLEVELAND AVENUE, STE. 111
NORTH FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

13180 NORTH CLEVELAND AVENUE, STE. 111
NORTH FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 26-0376275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITESMAN, GUY E
1715 MONROE STREET
FORT MYERS, FL 33901 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: GYARMATHY, JAMES P
Address: 13180 NORTH CLEVELAND AVENUE, STE. 111
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: PST () Delete
Name: GYARMATHY, JAMES P
Address: 13180 NORTH CLEVELAND AVENUE, STE. 111
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: SVP () Delete
Name: POLVERARI, BONNIE D
Address: 13180 NORTH CLEVELAND AVENUE, STE. 111
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: VPAS () Delete
Name: MONTGOMERY, MONICA
Address: 13180 NORTH CLEVELAND AVENUE, STE. 111
City-St-Zip: NORTH FT. MYERS, FL 33903

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:

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: MONICA MONTGOMERY

VP

04/29/2008

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