## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000061106

Entity Name: SMOKEY BONES, LLC

FILED Mar 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5900 LAKE ELLENOR DRIVE 8529 SOUTHPARK CIR ORLANDO, FL 32809

SUITE 250

ORLANDO, FL 32819

**Current Mailing Address: New Mailing Address:** 

5900 LAKE ELLENOR DRIVE 8529 SOUTHPARK CIR ORLANDO, FL 32809 SUITE 250

ORLANDO, FL 32819

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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: ADDITIONS/CHANGES:

() Delete Title: ( ) Change (X) Addition BARBEQUE INTEGRATED,, INC. Name: Name: Address: Address: 8529 SOUTHPARK CIR., SUITE 250

City-St-Zip: City-St-Zip: ORLANDO, FL 32819

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: IAN H BAINES 03/27/2008