


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 19, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L99000004152	
1. Entity Name BAD DOG CAFE, L.L.C.	

Principal Place of Business PO BOX 860 PANAMA CITY, FL 32401	Mailing Address PO BOX 860 PANAMA CITY, FL 32401
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DO NOT WRITE IN THIS SPACE



01102005No Chg-LLC CR2E083 (10/03)

4. FEI Number 04-3601658	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BRYANT, ROWLETT W  
833 HARRISON AVENUE  
PANAMA CITY, FL 32401

DO NOT WRITE  
IN THIS SPACE

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRYANT, ROWLETT W 833 HARRISON AVENUE PANAMA CITY, FL 32401
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Rowlett W. Bryant 1-13-05 850/763-1787

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