

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000006723

FILED  
Apr 09, 2002 8:00 AM  
Secretary of State

**Entity Name:** CHERRY MILLER'S CAFE, LLC

**Current Principal Place of Business:**

2895 CABBAGE HAMMOCK ROAD  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

2895 CABBAGE HAMMOCK ROAD  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

**FEI Number:** 59-3607250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUSAN ANN THOMASSON  
2895 CABBAGE HAMMOCK ROAD  
ST. AUGUSTINE, FL 32092 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SUSAN ANN THOMASSON,  
Address: 2895 CABBAGE HAMMOCK ROAD  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM ( ) Delete  
Name: DANNY BART THOMASSON,  
Address: 2895 CABBAGE HAMMOCK ROAD  
City-St-Zip: ST. AUGUSTINE, FL 32092

**ADDITIONS/CHANGES:**

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 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 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: SUSAN A. THOMASSON

MGRM

04/09/2002

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