


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M00000000954</b> 1. Entity Name ZAXBY'S HOLDINGS, L.L.C.	
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Principal Place of Business 1905 S. 14TH STREET FERNANDINA, FL 32034	Mailing Address 1040 FOUNDERS BLVD., SUITE 100 ATHENS, GA 30606
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**DO NOT WRITE IN THIS SPACE**



01042005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2239979	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**

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

**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.

**PETER F. SOUZA**  
ASSISTANT SECRETARY

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(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 MCLEROY, ZACHARY W 1040 FOUNDER'S BOULEVARD STE. 100 ATHENS, GA 30606
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TOWNLEY, TONY D 1040 FOUNDER'S BOULEVARD STE. 100 ATHENS, GA 30606
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01/20/05-80028-008 50.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

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

Date

Daytime Phone #

1-4-05

(706) 433-2259