

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002935

FILED  
May 14, 2007  
Secretary of State

**Entity Name:** SHRIMP BASKET OF FLORIDA, L.L.C.

**Current Principal Place of Business:**

4521 CORAL CIRCLE  
GULF SHORES, AL 365429078

**New Principal Place of Business:**

**Current Mailing Address:**

14600 PERDIDO KEY DR  
PENSACOLA, FL 32507

**New Mailing Address:**

P.. BOX 904  
GULF SHORES, AL 36547

FEI Number: 73-1658439      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CAHOON, DAVID  
14600 PERDIDO KEY DR  
PENSACOLA, FL 32507      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: SHRIMP BASKET, INC.,  
Address: 301 GULF SHORES PKWY  
City-St-Zip: GULF SHORES, AL 36542

Title: MGR      ( ) Delete  
Name: CAHOON, DAVID P  
Address: 14600 PERDIDO KEY DR  
City-St-Zip: PENSACOLA, FL 32507

Title: MGR      ( ) Delete  
Name: SPENCE, EDDIE  
Address: P.O. BOX 904  
City-St-Zip: GULF SHORES, AL 36547

**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:

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: DAVID CAHOON

MGR

05/14/2007

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