

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2001 8:00 am**  
**Secretary of State**

05-05-2001 90676 001 \*\*\*150.00  
 05-05-2001 90676 002 \*\*\*\*\*8.75

DOCUMENT # P00000041796

1. Entity Name  
**BACK YARD SUPPER CLUB, INC.**

Principal Place of Business  
**1801 NORTHWEST 2ND TERRACE  
 POMPANO BEACH FL 33060**

Mailing Address  
**1801 NORTHWEST 2ND TERRACE  
 POMPANO BEACH FL 33060**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-1008826**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	MCCLEOD, JOHN A	1801 NORTHWEST 2ND TERRACE	POMPANO BEACH FL 33060				
VD	MCCLEOD, VICTOR	1801 NORTHWEST 2ND TERRACE	POMPANO BEACH FL 33060				
SD	BROWN, ELLA M	1801 NORTHWEST 2ND TERRACE	POMPANO BEACH FL 33060				
TD	FULTON, FREDDIE	1801 NORTHWEST 2ND TERRACE	POMPANO BEACH FL 33060				
D	LOVE, RUTHIE	1801 NORTHWEST 2ND TERRACE	POMPANO BEACH FL 33060				

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*John A. McCleod*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*John A. McCleod*

Date

Daytime Phone #

*4-23-01*  
*954-946-8271*

CR2E034 (10/00)