


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000106282	
1. Entity Name SUGARBOO'S BAR-B-QUE, INC.	

Principal Place of Business 1305 GRANDVIEW ST. MT. DORA, FL 32757	Mailing Address P. O. BOX 350322 GRAND ISLAND, FL 32735
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WILLIAMS, JAMES T 36320 BRENDENSHIRE CT. GRAND ISLAND, FL 32735	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000125294 04/22/04-80078-018 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS, JAMES T P. O. BOX 350322 GRAND ISLAND, FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLIAMS, TINA P. O. BOX 350322 GRAND ISLAND, FL 32735
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE: James T. Williams **JAMES T. WILLIAMS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4/20/04 735-7675
DATE DAYTIME PHONE #