

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 09, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90022 029 \*\*\*150.00

DOCUMENT # P02000013027

1. Entity Name  
MELBOURNE BAR-B-Q, INC.



40010330

Principal Place of Business  
2622 LIGHTHOUSE BEND DR  
PONTE VEDRA BEACH, FL 32082

Mailing Address  
2622 LIGHTHOUSE BEND DR  
PONTE VEDRA BEACH, FL 32082

2. Principal Place of Business  
113 Settlor's Rd  
Suite, Apt. #, etc.

3. Mailing Address  
113 Settlor's Rd.  
Suite, Apt. #, etc.



01202006 Chg-P CR2E034 (11/05)

City & State  
Ponte Vedra Bch, FL  
Zip 32082 Country USA

City & State  
Ponte Vedra Bch FL  
Zip 32082 Country

4. FEI Number  
45-0463422  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDWELL, WILLIAM F  
2622 LIGHTHOUSE BEND DR  
PONTE VEDRA BEACH, FL 32082

7. Name and Address of New Registered Agent

Name  
William F Caldwell  
Street Address (P.O. Box Number is Not Acceptable)  
113 Settlor's Rd.  
City  
Ponte Vedra Beach FL Zip Code 32082

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 William F Caldwell  
Signature, typed or printed name of registered agent and title if applicable

1/19/06  
DATE

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS  
NAME CALDWELL, WILLIAM F  
STREET ADDRESS 2622 LIGHTHOUSE BEND DR  
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE William F Caldwell ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 113 Settlor's Rd.  
CITY-ST-ZIP Ponte Vedra Bch FL 32082

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered.

SIGNATURE: William F Caldwell  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/06 904 246-0713  
Date Daytime Phone