

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90056 038 ***150.00

DOCUMENT # P02000051185

1. Entity Name
OUTDOOR KITCHENS, INC.



Principal Place of Business
4513 S. TAMiami TRAIL
SARASOTA FL 34231

Mailing Address
4513 S. TAMiami TRAIL
SARASOTA FL 34231



2. Principal Place of Business

3. Mailing Address
5900 S. TAMiami TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE I

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State
Sarasota FL

4. FFI Number
15-3055171

Applied For
Not Applicable

Zip

Country

34231

Country

USA

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

FRIEDLI, WILLIAM E JR.
2341 TANGERINE DR.
SARASOTA FL 34239

Name **CATHERINE L. TRACY**
Street Address (P.O. Box Number is not Acceptable)
5900 S. TAMiami TRAIL
SUITE I
City **SARASOTA** **FL** Zip **34231**

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 **Catherine L. Tracy**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-22-03
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/D/ST** ☐ Delete
NAME **FRIEDLI, JAMIE M**
STREET ADDRESS **2341 TANGERINE DR.**
CITY-ST-ZIP **SARASOTA FL 34239**

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

TITLE ☒ Delete
NAME **FRIEDLI, WILLIAM E JR.**
STREET ADDRESS **2341 TANGERINE DR.**
CITY-ST-ZIP **SARASOTA FL 34239**

TITLE ☒ Change ☒ Addition
NAME **FRIEDLI, WILLIAM E., JR**
STREET ADDRESS **2341 TANGERINE DR.**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMIE M FRIEDLI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/03
Date

Daytime Phone #

CR2E034 (10/02)