


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 21, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000078936**


1. Entity Name  
**DOWN TO THE BONE BAR-B-Q INC.**



Principal Place of Business  
**110 SOUTH KINGS AVENUE  
BRANDON, FL 33511 US**

Mailing Address  
**110 SOUTH KINGS AVENUE  
BRANDON, FL 33511 US**

**DO NOT WRITE IN THIS SPACE**



07082005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>26-0067482</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**NETTLES, MARK D  
909 SMITH BAY DRIVE  
BRANDON, FL 33510**

**DO NOT WRITE  
IN THIS SPACE**

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 itself applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO NETTLES, MARK D 909 SMITH BAY DRIVE BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO NETTLES, WANDA L 909 SMITH BAY DRIVE BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/21/05-80002-015 150.00

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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 empowered.

**SIGNATURE:** *Mark Nettles* **7-8-05 (813)653-9903**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #