2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AN
Secretary of State

DOCUMENT # P0300011278 1. Entity Name ECKLE'S LOUNGE, INC.	88				Secretai	ry of Sta
1701 N. 25TH STREET	Mailing Address 1701 N. 25TH STREET FORT PIERCE, FL 34950		 	1 88/18 11/11 88/11 88/11 88/11	1) (1881 1881 1881 1883	5/81 (811 8 5) (1 185)
		(3)				
DO NOT WRITE II	CE	03182008 4. FEI Numb 27-008		CR2E034 (11/	Applied For	
			-	of Status Desired	□ \$8.75	Additional
6. Name and Address of Current Regi	stored Agent				· · · · · · · · · · · · · · · · · · ·	
MCDONALD, DAVE 1701 N. 25TH STREET FORT PIERCE, FL 34947				NOT W THIS SF		
The above named entity submits this statement for the the obligations of registered agent SIGNATURE	purpose of changing its registere	ed office or register	ed agent, or bo	oth, in the State of Flo		with, and accept
Signature, typed or printed name of registered agent and life if applicable (NOTE Registered Agent signature).			when reinstaling)		DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			.00 May Be ed to Fees		00870410 3-80090-000	6 150.00
10. OFFICERS AND DIRE	CTORS	J	San Marie Const.		1/2/3	
IIILE PST NAME MCDONALD, DAVE STREET ADDRESS 1701 N 25TH STREET CITY-ST-ZIP FORT PIERCE, FL 34947		, and a second		***		The same of the sa
NAME STREET ADDRESS CITY-ST-ZIP		**		<i>,</i>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-SI-7IP				THIS SF	ACE	e e
TITLE NAME				1 ×		. *

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:

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

lave McDonald

Dave McDonald

3/18/08

)ate

Daytime Phone ∉