2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

Secretary of State **DOCUMENT # P04000082149** 03-23-2006 90018 039 ***150.00 1. Entity Name BAREFOOT'S RESTAURANT INC. __ Principal Place of Business Mailing Address 🔍 3480 DELTONA BLVD. 3480 DELTONA BLVD. -50004986 SPRING HILL, FL 34606 SPRING HILL, FL 34606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 01182006 Chg-P City & State City & State 4. FEI Number Applied For 20-1177500 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DAVIES, MARY Street Address (P.O. Box Number is Not Acceptable) 17049 OXENHAM AVE. SPRING HILL, FL 34610 Zip Code FL 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 reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 -Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Change ☐ Addition Delete TITLE DAVIES, GLENN A NAME NAME 17049 OXENHAM AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ' SPRING HILL, FL 34610 CITY-ST-ZIP TITLE ☐ Change Delete TITLE ☐ Addition NAME TURLEY, ADELLE J NAME 12082 CRADOCK ST. STREET ADDRESS STREET ADDRESS SPRING HILL, FL 34608 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition DAVIES, MARY C NAME STREET ADDRESS 17049 OXENHAM AVE. STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34610 CITY-ST-ZIP TITLE Delete ☐ Addition TITLE ☐ Change TURLEY, JASON P NAME 12082 CRADOCK ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34608 CITY-ST-ZIP TITLE Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

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.

HDE,

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

FILED Mar 23, 2006 8:00 am

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Principal Place		Mailing Address		,-a	0110017
3480 DELTON Spring Hill,		3480 DELTONA BLVD. Spring Hill, Fl 34606		5 00	04986
		N. TUCCOA		01182006 No Chg-P	CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE			LE".	4. FEI Number 20-1177500	Applied For
				5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6Name and Address of Current Re	egistered Agent	7.4.		
DAVIES, MARY 17049 OXENHAM AVE. SPRING HILL, FL 34610				DO NOT W IN THIS SE	ार् ^{का} विशेषकार्थित । के किस्
	named entity submits this statement for toons of registered agent.	he purpose of changing its register	red office or register	red agent, or both, in the State of Fl	orida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE: Register	ed Agent signature required	I when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	S. Election Campaign Fina Trust Fund Contribution		.00 May Be led to Fees	
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