## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119871

Entity Name: PLANT CITY BAR-B-Q, INC.

**FILED** May 08, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4745 SUTTON PARK COURT SUITE 301 203 WEST ALEXANDER STREET JACKSONVILLE, FL 32224

PLANT CITY, FL 33566

**Current Mailing Address: New Mailing Address:** 

4745 SUTTON PARK COURT SUITE 301 203 WEST ALEXANDER STREET

JACKSONVILLE, FL 32224 PLANT CITY, FL 33566

FEI Number: 20-1426711 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLS, JAMES W JR

SMITH, SUSAN A 4745 SUTTON PARK COURT SUITE 301 203 WEST ALEXANDER STREET JACKSONVILLE, FL 32224 PLANT CITY, FL 33569

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.

SIGNATURE: SUSAN A. SMITH 05/08/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

MILLS, JAMES W JR Name: Name: SMITH, SUSAN A 12206 TIMBERLAKE ROAD 101 CANNON COURT Address: Address: City-St-Zip: PONTE VEDRA, FL 32082 City-St-Zip: RIVERVIEW, FL 33569

Title: Title: COO (X) Change ( ) Addition () Delete

MILLS, YOLANDA H DOWDALL, TRACY Name: Name:

100 KINGFISCHER DR 2808 BUCKHORN PRESERVE BLVD. Address: Address:

PONTE VEDRA BEACH, FL 32082 VALRICO, FL 33511 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN A. SMITH **CFO** 05/08/2008

Electronic Signature of Signing Officer or Director

Date