2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062008

LUPTON, NANCY ANN

5299 E. BUSCH BLVD.

TEMPLE TERRACE, FL 33617

Name:

Address:

City-St-Zip:

FILED Apr 12, 2008 Secretary of State

Entity Nar	ne: FAT MAN	'S BAR-B-QUE, INC	> .					
Current Principal Place of Business:				New Principal Place of Business:				
	JSCH BLVD. ERRACE, FL	33617						
Current Mailing Address:				New Mailing Address:				
P.O. BOX TEMPLE T	16768 ERRACE, FL	33687						
FEI Number:	20-2756345	FEI Number Applied	For () FEI Nu	ımber Not Appl	icable ()	Certifica	te of Status D	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
5299 E. BL	RALPH JAY JI JSCH BLVD. ERRACE, FL							
The above in the State		submits this stateme	nt for the purpose	of changing i	s registered	office or re	egistered ag	jent, or both,
SIGNATUR	RE:							
	Electron	ic Signature of Regi	stered Agent				Date	
Election Can	npaign Financing	Trust Fund Contributi	on ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	CD () LUPTON, RALP 5299 E. BUSCH TEMPLE TERRA	BLVD.		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	PD () LUPTON, RALP 5299 E. BUSCH TEMPLE TERR	BLVD.		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	VD () LUPTON, JEFF 5299 E. BUSCH TEMPLE TERR	BLVD.		Title: Name: Address: City-St-Zip:	VD (LUPTON, JEF 5299 E. BUSC TEMPLE TER	CH BLVD.	NE	
Title:	STD ()	Delete		Title:	STD C	X) Change (() Addition	

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.

Name:

Address:

City-St-Zip:

LUPTON, NANCY ANN

5299 E. BUSCH BLVD.

TEMPLE TERRACE, FL 33617

SIGNATURE: NANCY ANN LUPTON STD 04/12/2008