

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90212 037 ***150.00

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1. Entity Name
WOODY'S BAR-B-Q ROOSEVELT, INC.



Principal Place of Business
**4745 SUTTON PARK COURT, SUITE 301
JACKSONVILLE, FL 32224**

Mailing Address
**4745 SUTTON PARK COURT, SUITE 301
JACKSONVILLE, FL 32224**

2. Principal Place of Business
4291 Roosevelt Blvd.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Jacksonville, FL

City & State

Zip
32210

Country
USA

Zip

Country

04212006 Chg-P CR2E034 (11/05)

4. FEI Number
59-348049

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RAX CO.
50 NORTH LAURA STREET, SUITE 3300
JACKSONVILLE, FL 32202**

7. Name and Address of New Registered Agent

Name
James W. Mills, Jr.

Street Address (P.O. Box Number is Not Acceptable)
4745 Sutton Park Court

Suite 301

City
Jacksonville

FL Zip Code
32224

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 **X** **4/24/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**James W. Mills, Jr.
101 Cannon Ct.
Porte Vedra Beach, FL 32082**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Yolanda H. Mills
100 Kingfisher Dr.
Porte Vedra Beach, FL 32082**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: **Harry M. Garrett, CFO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/06 **904-992-0556**

Date Daytime Phone #