2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082468

Name:

Address:

City-St-Zip:

WILLIAMS, MARK E

90 ALBATROSS COURT

SANTA ROSA BEACH, FL 32459 US

Entity Name: BULLDOG PIZZA RESTAURANT, INC.

FILED Aug 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	ROSS COURT		15890 HIGHWAY 331 S	OUTH	
SANTARC	DSA BEACH, FL 32459	US	3 FREEPORT, FL 32439	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ROSS COURT		15890 HIGHWAY 331 S	OUTH	
SANTARC	DSA BEACH, FL 32459	US	3 FREEPORT, FL 32439	US	
FEI Number:	20-5052049 FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SANTA RO	ROSS COURT DSA BEACH, FL 32459 named entity submits th	US is statement for the pur	pose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent				Date	
Election Can	ee with s. 607.193(2)(b), F.S. npaign Financing Trust Fun- S AND DIRECTORS:		•	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DIR () Delete WILLIAMS, MARK 90 ALBATROSS COURT SANTA ROSA BEACH, FL (32459 US	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	PRES () Delete SHERER, STEWART E 90 ALBATROSS COURT SANTA ROSA BEACH, FL 3	32459 US	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	SEC () Delete		Title: () 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:

SIGNATURE: MARK WILLIAMS DIR 08/25/2008