

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000156843

**FILED**  
**Aug 31, 2011**  
**Secretary of State**

**Entity Name:** ART'S SOUTHERN STYLE SMOKEHOUSE BBQ, INC.

**Current Principal Place of Business:**

155 CRANES ROOST BLVD., STE 1150  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

15502 STONEYBROOK W. PKWY  
STE. 118  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

155 CRANES ROOST BLVD., STE 1150  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

979 COUNTS CREST CIRCLE  
APOPKA, FL 32712

**FEI Number:** 46-0461836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HOLMES, JASON L  
9033 WILES RD  
4-104  
CORAL SPRINGS, FL 33065 US

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

HOLMES, JASON L  
1604 SCARLET OAK LOOP  
#63B  
WINTER GARDEN, FL 34787 US

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:

08/31/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HOLMES, MARILYN J  
Address: 979 COUNTS CREST CIRCLE  
City-St-Zip: APOPKA, FL 32712

Title: VSD  
Name: HOLMES, ARTIS P  
Address: 979 COUNTS CREST CIRCLE  
City-St-Zip: APOPKA, FL 32712

I hereby 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 all other like empowered.

SIGNATURE: MARILYN J. HOLMES

PRES

08/31/2011

Electronic Signature of Signing Officer or Director

Date