## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000070012

PO BOX 1206

HIGH SPRINGS, FL 32655

Address: City-St-Zip:

Entity Name: CHARLIE'S RIB SHACK, INC

FILED Apr 15, 2009 Secretary of State

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Current P	rincipal Place	e of Business:	New Principal Place of Business:		
	/ 198TH AVE RINGS, FL 326	955			
Current Mailing Address:			New Mailing Address:		
PO BOX 1 HIGH SPF	206 RINGS, FL 326	855			
FEI Number	: 26-3042678	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:		
225 BLAN ORANGE The above	M TAX SERVIC DING BLVD PARK, FL 320 named entity e of Florida.	773 US	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( JACOBS, CHA PO BOX 1206 HIGH SPRING		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( JACOBS, FRE 1616 BRIGHTO ORANGE PAR	ON BLUFF CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SEC ( JACOBS, LINE	) Delete A	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: CHARLES JACOBS P 04/15/2009