## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

P96000012377 (3)

BONO'S BAR-B-Q & GRILL OF GEORGIA, INC.

## **FILED** Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					i concent un court dirth abuit matti Adill A	eimi asmisa stana, stiit	· )@4)( (### (###	
1301 RIVERPI	LACE BLVD.	1301 RIVERPLACE BLVD.						
SUITE 2340 JACKSONVILLE FL 32207		SUITE 2340 JACKSONVILLE FL 32207		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE			
SHOROGIVILLE PE SZZOV						3. Date Incorporated or Qualified		
					02/07/1996			
2. Principal P	lace of Business	2a, Mailing Address			4, FEI Number		Applied For	
21					59-3358980	Not Applicable		
Suite, Apt. #, etc Suite, Apt. #, etc.					5. Certificate of Status Desired	¬ \$8.75	5 Additional	
22		27			b. Certificate of Status Desired	Fee	Required	
City & Stat	City & State City & State				6. Election Campaign Financing	\$5.0	00 May Be	
<b>23</b> Zip	Country Zip Co			Trust Fund Contribution Added to Fees				
24	25	├── <b>\</b>	Country	y	8. This corporation owes or has paid to			
[27]	9. Name and Address of Curre		<del>101</del>			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
MI	INN, DANIEL B JR.		81	Name	10, realite and Address of their riegist	tored Agent		
ONE INDEPENDENT DRIVE								
SUITE 3000			82	Street	treet Address (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32202			63	1			<del></del>	
•			84	1			ip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
				eni signature		DATE		
12.	P A	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS			
NAME	OFFICIAL CAPETE		1.2 NAME			Change	e	
STREET ADDRESS	1301 RIVERPLACE BLVD.		1.3 STREET ADDRESS				[ ]	
CITY-ST-ZIP	IACKEONBALLE EL 20207		1.4 CITY - S				Įį.	
TITLE	ST	140		31-2IF	ST	☐ Change	e 167 Addition	
NAME	KUCKER, KENNETH L		2 2 NAME		Sylvia D. Weber			
STREET ADDRESS	1301 RIVERPLACE BLVD.		23 STREET	ADDRESS	3737 Bramble Road			
CITY-ST-ZIP	JACKSONVILLE FL 32207		2 4 CITY-1	ST-ZIP	Jacksonville, FL 32210			
TITLE			31 TITLE		THE VERY	☐ Change	e 🔲 Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CITY -	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	ŀ		Change	e Addition	
NAME			4. 2 NAME	İ				
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - S	T-ZIP				
NAME		□ nere ie	5.1 TITLE	ļ		Change	e [] Addition	
STREET ADDRESS			5.2 NAME					
			5.3 STREET				}	
CITY-ST-ZIP TITLE		☐ DELFTE	5.4 CITY-S 6.1 TITLE	1 • ZIP		Charac	Addition	
NAME			6.2 NAME	l		Change	e 🔲 Addition	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	1				
STITE STATE			■ 0.4 DIET - S	1-71				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplimental annual 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 of the receiver or trustee exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in