2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000014835

Title:

Name:

Address:

City-St-Zip:

Apr 23, 2008 Secretary of State

Entity Name: BAR-B-Q EXCHANGE, INC. **Current Principal Place of Business: New Principal Place of Business:** 25 CYPRESS EDGE DRIVE PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address:** P.O. BOX 459 PALATKA, FL 32178 FEI Number: 59-3360569 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: STANTON, MARK P 1305 ST JOHNS AVE US PALATKA, FL 32177 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MCNAB, JAMES M JR Name: Name: 5185 SOUTH TROPICAL TRAIL Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: Title: Title: () Delete (X) Change () Addition MCNAB, MARGARET S Name: AYREY, CURTIS A Name: 1386 ENCLAVE DR 20 RUE GRANDE MER Address: Address: PALM COAST, FL 32137 ROCKLEDGE, FL 32955 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: STANTON, MARK P STANTON, MARK P Name: Name: 1305 ST JOHNS AVE 1305 ST JOHNS AVE Address: Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: JAMES M MCNAB JR 04/23/2008

() Delete

MCNAB, JAMES M

PALM COAST, FL 32137

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(X) Change () Addition

MCNAB, JAMES M

20 RUE GRANDE MER

PALM COAST, FL 32137