# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 12, 2002 8:00 AM**
**Secretary of State**

DOCUMENT# P98000067380

**Entity Name:** RIB CITY IMMOKALEE, INC.

**Current Principal Place of Business:**

621 N 15TH ST
IMMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

13575 S CLEVELAND AVENUE
FORT MYERS, FL 33907

**New Mailing Address:**

12575 S CLEVELAND AVE
FORT MYERS, FL 33907

**FEI Number: 65-0853949** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PEDEN, PAUL D
2122 2ND ST
FORT MYERS, FL 33901

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

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

**This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: PEDEN, PAUL D
Address: 2122 2ND ST
City-St-Zip: FORT MYERS, FL 33901

Title: STD ( ) Delete
Name: PEDEN, CRAIG D
Address: 2122 2ND ST
City-St-Zip: FORT MYERS, FL 33901

Title: V ( ) Delete
Name: COOK, PETER M
Address: 7771 CAMERON CIR
City-St-Zip: FORT MYERS, FL 33912

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: COOK, PETER M
Address: 2122 2ND ST
City-St-Zip: FORT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: PAUL D PEDEN P 04/12/2002

Electronic Signature of Signing Officer or Director Date