

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025574

Entity Name: RIB CITY LEHIGH, INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

1480 LEE BOULEVARD
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

14729 COLONIAL BLVD
SUITE 203
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 65-0905058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEDEN, PAUL D
2122 SECOND STREET
FORT MYERS, FL 33901 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEDEN, PAUL D
Address: 1429 COLONIAL BLVD, SUITE 203
City-St-Zip: FORT MYERS, FL 33907

Title: STD () Delete
Name: PEDEN, CRAIG
Address: 1429 COLONIAL BLVD, SUITE 203
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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.

SIGNATURE: PAUL PEDEN

PD

02/19/2009

Electronic Signature of Signing Officer or Director

_____ Date