

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000072881

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: LEFTY'S TAVERN & GRILLE, INC.

## Current Principal Place of Business:

11300 STATE RD 84  
DAVIE, FL 33325

## New Principal Place of Business:

## Current Mailing Address:

11300 STATE RD 84  
#107  
DAVIE, FL 33325

## New Mailing Address:

FEI Number: 65-0989472      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, BYRON  
11300 SR 84  
DAVIE, FL 33325      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: VP ( ) Delete  
Name: BROWN, BYRON  
Address: 2200 SW 115 TERRACE  
City-St-Zip: DAVIE, FL 33322

Title: P ( ) Delete  
Name: MILMOE, CHRIS  
Address: 1822 SW 50 STREET  
City-St-Zip: SOUTHWEST RANCHES, FL 33131

## 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: BYRON BROWN

VP

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date