

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **S95217**

1. Entity Name  
**BILLY BOB'S BARBECUE COMPANY**



**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90126 045 \*\*\*550.00

0124963 AT

Principal Place of Business  
**911 GULF BREEZE PKY  
GULF BREEZE FL 32561  
US**

Mailing Address  
**911 GULF BREEZE PKY  
GULF BREEZE FL 32561  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **NOT APPLICABLE**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEBBINS, ARTHUR H.  
2553 MARY FOX DR.  
GULF BREEZE FL 32561**

Name **Ben W. Rogers, Sr.**  
Street Address (P.O. Box Number is Not Acceptable)  
**2505 Meek St  
Gulf Breeze**  
City **FL** Zip Code **32563**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9/4/03**

**FILE NOW!!! FEE IS \$550.00**

After September 10, 2003 Fee will be \$750.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CSD STEBBINS, ARTHUR H 2553 MARY FOX DR. GULF BREEZE FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD STEBBINS, CAROLYN G 2553 MARY FOX DR. GULF BREEZE FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D ROLLINS, NORMAN D 144 2ND AVE N #333 NASHVILLE TN</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CSD Ben W. Rogers, Sr. 2505 Meek St Gulf Breeze, FL 32563</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD Sherry H. Rogers 2505 Meek St Gulf Breeze, FL 32563</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Kelly Allen 3220 Birdseye Cir. Gulf Breeze, FL 32563</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE REQUIRED **Ben W. Rogers**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9/4/03**  
Date

**850 934-2999**  
Daytime Phone #

CR2E034 (4/03)



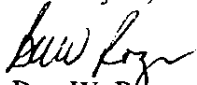
September 4, 2003

FL Department of State  
Glenda Hood  
Secretary of State

This is a letter I received after submitting a UBR for Billy Bob's Barbecue. I am a new owner and did not realize that this was due until right at the last of May. I feel that I do not owe the \$550.00 late fee on this, but I am sending it anyway, just to maintain good standing with the State of FL.

Please check into this and if I am due a refund please let me know.

Thank you,

A handwritten signature in cursive script, appearing to read "Ben W. Rogers".

Ben W. Rogers  
Billy Bob's Barbecue

