2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L02000022199

Entity Name: PARK AVENUE RESTAURANT LLC

Current Principal Place of Business:

3348 EDGEWATER DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

3348 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-3507676 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, WARREN E
28 WEST CENTRAL BLVD., SUITE 400
ORLANDO, FL 32801 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WILLIAMS, MARILYN B
Address: 316 WING LANE
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM ( ) Delete
Name: SCHWARTZ, RONALD N
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: MGRM ( ) Delete
Name: DEMETREE, MARY L
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32104

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WILLIAMS, MARILYN B
Address: 312 WING LANE
City-St-Zip: WINTER PARK, FL 32789

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARILYN B. WILLIAMS MGRM 04/30/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date