

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109231

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: CORINTHIAN RESTAURANT GROUP, LLC

**Current Principal Place of Business:**

706 TURNBULL AVENUE, STE. 303  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

706 TURNBULL AVENUE, STE. 303  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 20-3780657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UDVARI, GEORGE R  
706 TURNBULL AVENUE, STE. 303  
ALTAMONTE SPRINGS, FL 32701 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WRIGHT, MICHELLE  
Address: 235 VENETIAN BAY CIRCLE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: WRIGHT, BRIAN  
Address: 235 VENETIAN BAY CIRCLE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: WRIGHT, BRADLEY  
Address: 665 OAK HARBOUR DRIVE, UNIT 103  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM ( ) Delete  
Name: WRIGHT, BRETT  
Address: 300 E. GULLEY AVENUE  
City-St-Zip: OAKLAND, FL 34760

Title: MGRM ( ) Delete  
Name: WRIGHT, ERICA  
Address: 300 E. GULLY AVENUE  
City-St-Zip: OAKLAND, FL 34760

**ADDITIONS/CHANGES:**

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

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

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

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 Chapter 119, 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: BRETT WRIGHT

MGRM

04/18/2006

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