

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jul 17, 2007 8:00 am
Secretary of State

05-02-2007 90339 042 ****50.00

DOCUMENT # L06000022436 1. Entity Name NICK'S GRILL LLC					
Principal Place of Business 261 SW NATIVITY TERR PORT ST LUCIE FL 34984 US			Mailing Address 261 SW NATIVITY TERR PORT ST LUCIE FL 34984 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number	
				Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				1st MOORE CR2E083 (10/06)	
6. Name and Address of Current Registered Agent COZINE, NICHOLAS 261 SW NATIVITY TERR PORT ST LUCIE FL 34984				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COZINE, NICHOLAS 261 SW NATIVITY TERR PORT ST LUCIE FL 34984	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COZINE, SHEILA 261 SW NATIVITY TERR PORT ST LUCIE FL 34984	☐ Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 4-21-07 772-240-0911					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					