

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006976

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: UR OF MERRITT ISLAND FL, LLC

**Current Principal Place of Business:**

100 CHARLES PARK ROAD  
WEST ROXBURY, MA 02132

**New Principal Place of Business:**

**Current Mailing Address:**

100 CHARLES PARK ROAD  
WEST ROXBURY, MA 02132

**New Mailing Address:**

FEI Number: 41-2222115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: UNO RESTAURANTS, LLC  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, MA 02132

Title: COO ( ) Delete  
Name: ZINGLE, ROGER L  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, MA 02132

Title: CEO ( ) Delete  
Name: GUIDARA, FRANCIS W P  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, M 02132

Title: CFOT ( ) Delete  
Name: PSALLLIDAS, LOUIE  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, MA 02132

Title: VP S ( ) Delete  
Name: HERZ II, GEORGE W  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, MA 02132

Title: AS ( ) Delete  
Name: AHLFELD, ROGER A  
Address: 100 CHARLES PARK ROAD  
City-St-Zip: WEST ROXBURY, MA 02132

**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:

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 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: GEORGE W. HERZ II

VP S

04/30/2009

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