

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078189

**Entity Name:** RESTAURANT DELIVERY DEVELOPERS, LLC

**Current Principal Place of Business:**

4110 SW 34TH STREET  
SUITE 16  
GAINESVILLE, FL 32608

**Current Mailing Address:**

4110 SW 34TH STREET  
SUITE 16  
GAINESVILLE, FL 32608

**FEI Number:** 27-0729766

**Certificate of Status Desired:** No

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

KARNIEWICZ, JUDY  
1406 W. FLETCHER AVENUE  
TAMPA, FL 33612 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name COLANGELO, THOMAS  
Address 4110 SW 34TH STREET, SUITE 16  
City-State-Zip: GAINESVILLE FL 32608

Title MGRM  
Name SINOR, DANIEL O  
Address 1325 STONE ROAD, #401  
City-State-Zip: TALLAHASSEE FL 32303

Title MGRM  
Name MOORE, WILLIAM C  
Address 3602 UPPER UNION ROAD  
City-State-Zip: ORLANDO FL 32814

Title MGRM  
Name BROWN, ANDREW N  
Address 1570 LAKEHURST AVENUE  
City-State-Zip: WINTER PARK FL 32789

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS COLANGELO

MGRM

04/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date