

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000103458

**Entity Name:** LEO'S DINER LLC

**Current Principal Place of Business:**

333 NORTH ORANGE AVE  
ORLANDO, FL 32801

**Current Mailing Address:**

333 NORTH ORANGE AVE  
ORLANDO, FL 32801

**FEI Number:** 27-1189966

**Certificate of Status Desired:** No

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

THOMAS, SIMPSON KSR  
333 NORTH ORANGE AVE  
ORLANDO, FL 32801 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	Title	MGRM
Name	SIMPSON, THOMAS KSR	Name	SIMPSON, PAMELA J
Address	2448 EKANA DR	Address	2448 EKANA DR
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765

*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 K SIMPSON SR

MGRM

04/28/2016

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date