

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000153736

**Entity Name:** DEL FRISCO'S OF FLORIDA, LLC

**Current Principal Place of Business:**

920 S. KIMBALL AVE., SUITE 100  
ATTN: LEGAL/LICENSING  
SOUTHLAKE, TX 76092

**Current Mailing Address:**

920 S. KIMBALL AVE., SUITE 100  
ATTN: LEGAL/LICENSING  
SOUTHLAKE, TX 76092 US

**FEI Number:** 46-4215513

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT  
Name            MEDNANSKY, MARK S  
Address        920 S. KIMBALL AVE., SUITE 100  
City-State-Zip: SOUTHLAKE TX 76092

Title            SECRETARY  
Name            MARTENS, WILLIAM S III  
Address        920 S. KIMBALL AVE., SUITE 100  
City-State-Zip: SOUTHLAKE TX 76092

Title            TREASURER  
Name            PENNISON, THOMAS J JR.  
Address        920 S. KIMBALL AVE., SUITE 100  
City-State-Zip: SOUTHLAKE TX 76092

Title            MANAGER  
Name            MEDNANSKY, MARK S  
Address        920 S. KIMBALL AVE., SUITE 100  
City-State-Zip: SOUTHLAKE TX 76092

*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:** MARK S. MEDNANSKY

**PRESIDENT**

**04/01/2015**

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

\_\_\_\_\_  
Date