

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000002684

**Entity Name:** FIFTH DINING SARASOTA LLC**Current Principal Place of Business:**1 INDEPENDENCE PT  
STE 305  
GREENVILLE, SC 29615**Current Mailing Address:**1 INDEPENDENCE PT  
STE 305  
GREENVILLE, SC 29615 US**FEI Number:** 46-5404597**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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, CEO  
Name VERROS, CHRIS  
Address ONE LANDMARK SQUARE  
FL 18  
City-State-Zip: STAMFORD CT 06901

Title EVP, CFO, CAO  
Name MONAVAR, HADI  
Address ONE LANDMARK SQUARE  
FL 18  
City-State-Zip: STAMFORD CT 06901

Title CORPORATE SECRETARY  
Name KING, KEITH B.W.  
Address ONE LANDMARK SQUARE  
FL 18  
City-State-Zip: STAMFORD CT 06901

Title VP, COO  
Name PANGBURN, STEVE  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title VP  
Name DONATONE, LORNA  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title VP  
Name MORSE, THOMAS  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title VP  
Name RAMESH, MAHALINGAM  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title VP  
Name JACKSON, JENNIFER WOOLBRIGHT  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG CT 20878

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*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:** HADI MONAVAR

EVP,CFO,CAO

01/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title ASSISTANT SECRETARY  
Name MCGLOCKTON, JOAN  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title ASSISTANT SECRETARY  
Name WALTER, SUSAN  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG CT 20878

Title ASSISTANT TREASURER  
Name BROCK, PAUL  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title SHAREHOLDER  
Name VOLUME SERVICES AMERICA, INC.  
Address 1 INDEPENDENCE PT  
STE 305  
City-State-Zip: GREENVILLE SC 29615

Title ASSISTANT SECRETARY  
Name BROOKS, SCOTT  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title VP / TREASURER  
Name BLASS, MARC  
Address 9801 WASHINGTONIAN BLVD  
City-State-Zip: GAITHERSBURG MD 20878

Title LLC MANAGER  
Name FERRULO, SALVATORE  
Address ONE LANDMARK SQUARE  
FL 18  
City-State-Zip: STAMFORD CT 06901