

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006148

FILED
Apr 28, 2009
Secretary of State

Entity Name: SAM SELTZER'S STEAK HOUSES OF AMERICA, INC.

Current Principal Place of Business:

4744 N. DALE MABRY
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4744 N. DALE MABRY
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3391125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHELIN, SALLY
4744 N DALE MABRY HWY
TAMPA, FL 33614 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MOUNTFORD, JOHN
Address: 4744 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33614

Title: S () Delete
Name: KAHELIN, SALLY
Address: 4744 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33614 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MCGRATH, ALEXANDER S
Address: 800 BOYLSTON ST, SUITE 810
City-St-Zip: BOSTON, MA 02199 US

Title: D () Change (X) Addition
Name: POTTER, JEFFREY W
Address: 800 BOYLSTON ST, SUITE 810
City-St-Zip: BOSTON, MA 02199 US

Title: D () Change (X) Addition
Name: FLANAGAN, DEREK
Address: 15 KEITH HILL RD, SUITE 100
City-St-Zip: GRAFTON, MA 01519 US

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALLY KAHELIN

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04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date