

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H25922

Entity Name: HOOTER'S II, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

107 HAMPTON ROAD
SUITE 200
CLEARWATER, FL 33759 US

New Principal Place of Business:

Current Mailing Address:

107 HAMPTON ROAD
SUITE 200
CLEARWATER, FL 33759 US

New Mailing Address:

FEI Number: 59-2463904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEFER, NEIL G.
107 HAMPTON ROAD
SUITE 200
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

KIEFER, NEIL G.
107 HAMPTON ROAD
SUITE 200
CLEARWATER, FL 33759 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: NEIL G. KIEFER

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KIEFER, NEIL G.
Address: 7296 BRYCE POINT
City-St-Zip: PINELLAS PARK, FL 33782

Title: DVP () Delete
Name: DIGIANNANTONIO, GILB, ERT
Address: 3717 WOODRIDGE PLACE
City-St-Zip: PALM HARBOR, FL 34684

Title: DST () Delete
Name: RANIERI, WILLIAM
Address: 949 SKYE LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: DROSTE, EDWARD C.,
Address: 20 MIDWAY ISLAND
City-St-Zip: CLEARWATER, FL 33759

Title: D () Delete
Name: JOHNSON, DENNIS D.,
Address: 277 ABERDEEN ST.
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: NEIL G. KIEFER

PRES

04/16/2008

Electronic Signature of Signing Officer or Director

Date