

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K60768

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** EMILY'S FAMILY RESTAURANT INCORPORATED

**Current Principal Place of Business:**

ILIAS VAVOULARIS  
2609 ALTERNATE U S 19 NORTH  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

ILIAS VAVOULARIS  
2609 ALTERNATE U S 19 NORTH  
PALM HARBOR, FL 34683

**New Mailing Address:**

**FEI Number:** 65-0092017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAVOULARIS, ILIAS  
2609 ALTERNATE US 19 NORTH  
PALM HARBOR, FL 34683 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: VAVOULARIS, ILIAS  
Address: 2609 ALTERNATE US 19 NO  
City-St-Zip: PALM HARBOR, F 34683

Title: VP  
Name: VAVOULARIS, STEVE  
Address: 2609 ALTERNATE US 19 NO  
City-St-Zip: PALM HARBOR, FL 34683

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 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 all other like empowered.

SIGNATURE: ILIAS VAVOULARIS

RA

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date