

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90023 026 ***138.75

DOCUMENT # L00000012911

1. Entity Name
GRATZZI'S RISTORANTE, L.C.



Principal Place of Business
2325 ULMERTON RD., STE. 20
CLEARWATER, FL 33762

Mailing Address
2325 ULMERTON RD., STE. 20
CLEARWATER, FL 33762

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03262008 Chg-LLC CR2E083 (12/06)

4. FEI Number
59-3678526

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORRIS, GREGORY D
2325 ULMERTON RD STE 20
CLEARWATER, FL 33762

7. Name and Address of New Registered Agent

Name *Burton Bullard*

Street Address (P.O. Box Number is Not Acceptable)

2325 Ulmerton Rd, Suite 20

City *Clearwater*

FL

Zip Code *33762*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☒ Delete
NAME BULLARDO, FRED B JR.
STREET ADDRESS 2325 ULMERTON RD., STE. 20
CITY-ST-ZIP CLEARWATER, FL 33762

TITLE MGR ☐ Delete
NAME MORRIS, GREGORY D
STREET ADDRESS 2325 ULMERTON RD., STE. 20
CITY-ST-ZIP CLEARWATER, FL 33762

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME *BURTON BULLARD*
STREET ADDRESS *2325 ULMERTON RD, Suite 20*
CITY-ST-ZIP *Clearwater, FL 33762*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

Burton Bullard

4/28/08

727-576-6424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #