

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000006185

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** SAN GELATO CAFE FRANCHISING GROUP, L.L.C.

**Current Principal Place of Business:**

1785 FIM BLVD.  
FT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

1785 FIM BLVD.  
FT WALTON BEACH, FL 32547

**New Mailing Address:**

**FEI Number:** 59-3722896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLEET, H. BART  
1283 N. EGLIN PARKWAY  
SUITE A  
SHALIMAR, FL 325790000 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** TREMOLINI, GUIDO  
**Address:** 1785 FIM BLVD.  
**City-St-Zip:** FT WALTON BEACH, FL 32547

**Title:** MGRM  
**Name:** FARONI, SIMONA  
**Address:** 1785 FIM BLVD.  
**City-St-Zip:** FT WALTON BEACH, FL 32547

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** SIMONA FARONI

MGRM

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date