

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90027 019 ****50.00

DOCUMENT # L01000013020

1. Entity Name

GOLD COAST GRILL-1, LLC



Principal Place of Business

**7701 NEWPORT LANE
PARKLAND FL 33067**

Mailing Address

**7701 NEWPORT LANE
PARKLAND FL 33067**

2. Principal Place of Business

2752 UNIVERSITY DRIVE

3. Mailing Address

2752 UNIVERSITY DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS FL

City & State

CORAL SPRINGS FL

4. FEI Number

65-1128557

Applied For

Not Applicable

Zip

33065

Country

US

Zip

33065

Country

US

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

TOOMY, KEVIN

**7421 CYPRESSHEAD DR NORTH
PARKLAND FL 33067**

7. Name and Address of New Registered Agent

Name

TOOMY, KEVIN

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

2752 UNIVERSITY DRIVE

City

CORAL SPRINGS

FL

Zip Code

33065

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 \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE **MGRM** ☐ Delete
NAME **TOOMY, KEVIN**
STREET ADDRESS **7701 NEWPORT LANE**
CITY-ST-ZIP **PARKLAND FL 33067**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE **MGRM** ☒ Change ☐ Addition
NAME **TOOMY, KEVIN**
STREET ADDRESS **2752 UNIVERSITY DRIVE**
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **ROBERT S TOOMY**
STREET ADDRESS **1750 SCOTTSVILLE ROAD**
CITY-ST-ZIP **BOWLING GREEN KY 42104**

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

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 exemption stated in Section 119.07(3)(i), 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:

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

ROBERT S TOOMY

3/5/03

270/781-2859

Date

Daytime Phone #

CR2E083 (10/02)