

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90040 024 \*\*\*\*50.00

**DOCUMENT # L03000019904**

1. Entity Name  
CAFE ON THE RIVER, LLC



Principal Place of Business  
19773 E. PENNSYLVANIA AVENUE  
DUNNELLON, FL 34431

Mailing Address  
19773 E. PENNSYLVANIA AVENUE  
DUNNELLON, FL 34431

20057004



02102005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
76-0734472

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BRAHE, RANDALL F JR  
5623 W. RIVERBEND ROAD  
DUNNELLON, FL 34433

12103 Palmetto Way  
Dunnellon FL 34432

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME BRAHE, RANDALL F JR.  
STREET ADDRESS 12103 Palmetto Way  
CITY-ST-ZIP Dunnellon FL 34432

TITLE  
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CITY-ST-ZIP

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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, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-30-05

352 465 5724