

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035674

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: STAMATIS FAMILY RESTAURANT, LLC

**Current Principal Place of Business:**

3095 ST. JAMES STREET  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

1890 TAMIAMI TRAIL  
B  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

1186 SANDY ST  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

FEI Number: 20-0240130      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WOTITZKY, HAL ESQ.  
223 TAYLOR STREET  
PUNTA GORDA, FL 33950      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      (X) Delete  
Name: STATHARAS, STAMELOS  
Address: 3095 ST. JAMES STREET  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM      (X) Delete  
Name: KOUROUPI, ZOI  
Address: 3095 ST. JAMES STREET  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM      ( ) Delete  
Name: STATHARAS, STAMELOS  
Address: 1186 SANDY ST  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM      ( ) Delete  
Name: KOUROUPI, ZOI  
Address: 1186 SANDY ST  
City-St-Zip: PORT CHARLOTTE, FL 33952

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      (X) Change ( ) Addition  
Name: STATHARAS, STAMELOS  
Address: 1186 SANDY ST  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM      (X) Change ( ) Addition  
Name: KOUROUPI, ZOI  
Address: 1186 SANDY ST  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: STAMELOS STATHARAS

MGRM

03/28/2009

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