## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043138

Entity Name: MATTISON'S STEAKHOUSE, LLC

FILED Apr 06, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

525 BAY ISLES RD. 25 AVE OF THE FLOWERS LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228

**Current Mailing Address: New Mailing Address:** 

25 AVE OF THE FLOWERS 525 BAY ISLES RD. LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228

FEI Number: 75-3136174 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HANEY, R. REID 101 E KENNEDY BLVD, STE 4100 TAMPA, FL 33602

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:

() Delete MATTISON, PAUL R Name:

Address: 525 BAY ISLES ROAD City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGR () Delete Name: SANGO, JASON Address: 525 BAY ISLES ROAD

City-St-Zip: LONGBOAT KEY, FL 34228

## ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition

MATTISON, PAUL R Name: Address: 25 AVE OF THE FLOWERS City-St-Zip: LONGBOAT KEY, FL 34228

(X) Change ( ) Addition Title: MGR

Name: SANGO, JASON

Address: 25 AVE OF THE FLOWERS City-St-Zip: LONGBOAT KEY, FL 34228

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: PAUL MATTISON 04/06/2009