

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069608

FILED  
Mar 29, 2011  
Secretary of State

**Entity Name:** CARSON'S ROAD HOUSE OF FORT MYERS, L.L.C.

**Current Principal Place of Business:**

18767 S TAMiami TRAIL  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

**Current Mailing Address:**

3051 MILLER ROAD  
ANN ARBOR, MI 48103 US

**New Mailing Address:**

**FEI Number:** 20-1715148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GIBBONS, MICHAEL C  
21775 SOUND WAY  
UNIT 102  
ESTERO, FL 33928 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:** SERRAS, DENNIS  
**Address:** 605 S MAIN STREET STE 2  
**City-St-Zip:** ANN ARBOR, MI 48104 US

**Title:** MGRM  
**Name:** GIBBONS, DENNIS  
**Address:** 605 S MAIN STREET STE 2  
**City-St-Zip:** ANN ARBOR, MI 48104 US

**Title:** MGRM  
**Name:** PESUSICH, SIMON  
**Address:** 605 S MAIN STREET STE 2  
**City-St-Zip:** ANN ARBOR, MI 48104 US

**Title:** MGRM  
**Name:** MAINSTREET VENTURES INC  
**Address:** 605 S MAIN STREET STE 2  
**City-St-Zip:** ANN ARBOR, MI 48104 US

**Title:** MGRM  
**Name:** WITZEL, KENT  
**Address:** 28901 CAVELL TERRACE  
**City-St-Zip:** NAPLES, FL 34119 US

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:** DAVID LIGOTTI

CPA

03/29/2011

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