

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092165

Entity Name: UPSCALE DINING, LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

1825 BUSINESS PARK BLVD.
SUITE A
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9547
DAYTONA BEACH, FL 321209547

New Mailing Address:

FEI Number: 32-0135109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTLETT, LAURENCE H
1825 BUSINESS PARK BLVD.
SUITE A
DAYTONA BEACH, FL 32114 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 () Delete
Name: BARTLETT, LAURENCE H
Address: 106 N. ST. ANDREWS DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: CROTTY, KATHLEEN L
Address: 106 N. ST. ANDREWS DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: CROTTY, W. GARRETT
Address: 5 TOMOKA VIEW
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: DUNN, BARRY TENANT
Address: 3309 OAK VISTA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32124

Title: MGRM () Delete
Name: DUNN, DEBORAH TENANT
Address: 3309 OAK VISTA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32124

Title: MGRM () Delete
Name: DUNN, SAMUEL TENANT
Address: 42 CHOCTAW TRAIL
City-St-Zip: ORMOND BEACH, FL 32124

ADDITIONS/CHANGES:

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

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

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

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

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

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

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: LAURENCE H. BARTLETT

MR.

04/23/2009

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