


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 03, 2007 08:00 AM**  
**Secretary of State**


**DOCUMENT # L05000067358**

1. Entity Name  
**TOWER EATERY, LLC**



Principal Place of Business <b>2274 FENTON AVENUE          CLERMONT, FL 34711</b>	Mailing Address <b>2274 FENTON AVENUE          CLERMONT, FL 34711</b>
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**DO NOT WRITE IN THIS SPACE**



03132007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>20-3130095</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WELU, GERALD  
 2274 FENTON AVENUE  
 CLERMONT, FL 34711**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WELU, GERALD 2274 FENTON AVENUE CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WELU, MARY KAY 2274 FENTON AVENUE CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WELU, DOUGLAS L 786 S. GRAND HIGHWAY CLERMONT, FL 34711
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Mary Kay Welu* MGRM, Mary Kay Welu      **3 52-242-2358**  
 \_\_\_\_\_      **4-29-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #