

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085744

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

**Entity Name:** MOE'S SOUTHWEST GRILL PORT CHARLOTTE, LLC

**Current Principal Place of Business:**

2025 EAST SEVENTH AVENUE  
TAMPA, FL 33605 US

**New Principal Place of Business:**

2025 EAST SEVENTH AVENUE  
TAMPA, FL 336053901 US

**Current Mailing Address:**

2025 EAST SEVENTH AVENUE  
TAMPA, FL 33605 US

**New Mailing Address:**

2025 EAST SEVENTH AVENUE  
TAMPA, FL 336053901 US

**FEI Number:** 20-3429817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEDOROVICH, DENNIS  
2025 EAST SEVENTH AVENUE  
TAMPA, FL 3605 US

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

FEDOROVICH, DENNIS  
2025 EAST SEVENTH AVENUE  
TAMPA, FL 36053901 US

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:**

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** GCF VENTURES, LLC  
**Address:** 2025 EAST SEVENTH AVENUE  
**City-St-Zip:** TAMPA, FL 33605

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** GCF VENTURES, LLC  
**Address:** 2025 EAST SEVENTH AVENUE  
**City-St-Zip:** TAMPA, FL 336053901

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:** DENNIS J. FEDOROVICH

MGRM

04/29/2009

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