

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101395

FILED
Apr 09, 2010
Secretary of State

Entity Name: CAPITOL EAST RESTAURANT ASSOCIATES, LLC

Current Principal Place of Business:

500 N. WESTSHORE BLVD.
SUITE 740
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

500 N. WESTSHORE BLVD.
SUITE 740
TAMPA, FL 33609

New Mailing Address:

FEI Number: 20-3623653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIOVENCO, NORMAN J
500 N. WESTSHORE BLVD., SUITE 740
TAMPA, FL 33609 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: GRM
Name: GLOVER, GEORGE
Address: 500 N. WESTSHORE BLVD., SUITE 740
City-St-Zip: TAMPA, FL 33609

Title: GMR
Name: SMITH, FORD
Address: 500 N. WESTSHORE BLVD., SUITE 740
City-St-Zip: TAMPA, FL 33609

Title: GMR
Name: GIOVENCO, NORMAN
Address: 500 N. WESTSHORE BLVD., SUITE 740
City-St-Zip: TAMPA, FL 33609

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: J. NORMAN GIOVENCO

MGRM

04/09/2010

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