2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L06000041881

Entity Name: DINERSNATION.COM LLC

Current Principal Place of Business:

311 STILLWATER COVE
DESTIN, FL 32541

New Principal Place of Business:

35 RED BAY CT.
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

311 STILLWATER COVE
DESTIN, FL 32541

New Mailing Address:

35 RED BAY CT.
SANTA ROSA BEACH, FL 32459

FEI Number: 41-2227979 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, GREG J MGR
311 STILLWATER COVE
DESTIN, FL 32541 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: MGR ( ) Delete
Name: FISHER, GREG
Address: 311 STILLWATER COVE
City-St-Zip: DESTIN, FL 32541

Title: MGR (X) Delete
Name: HEIN, BEN
Address: 311 STILLWATER COVE
City-St-Zip: DESTIN, FL 32541

Title: MGR (X) Delete
Name: FISHER, MIKE
Address: 311 STILLWATER COVE
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FISHER, GREG
Address: 35 RED BAY CT.
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ( ) Change ( ) Addition
Name:
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: GREG FISHER MGR 03/19/2009

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