

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000047120

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

**Entity Name:** OLDE TOWN PIZZERIA - BLOOMINGDALE LC

**Current Principal Place of Business:**

115 W. BLOOMINGDALE AVENUE  
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

115 W. BLOOMINGDALE AVENUE  
BRANDON, FL 33511 US

**New Mailing Address:**

**FEI Number:** 20-4828886

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROSSMAN, DAVID N  
115 W. BLOOMINGDALE AVE  
BRANDON, FL 33511 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  
**Name:** GROSSMAN, DAVID N MGRM  
**Address:** 115 W. BLOOMINGDALE AVE.  
**City-St-Zip:** BRANDON, FL 33511 US

**Title:** MGRM  
**Name:** GROSSMAN, PATRICIA J MGRM  
**Address:** 115 W. BLOOMINGDALE AVE.  
**City-St-Zip:** BRANDON, FL 33511 US

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:** DAVID GROSSMAN

MGRM

01/22/2010

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