

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000090294

FILED
Sep 11, 2009
Secretary of State

Entity Name: TRADEWINDS GRILLE, LLC

Current Principal Place of Business:

1425 HAND AVENUE
SUITE N
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1425 HAND AVENUE
SUITE N
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 20-5543363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, CRAIG A
1425 HAND AVENUE
SUITE N
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

TARDOUS, ANASYMONE
1425 HAND AVENUE
SUITE N
ORMOND BEACH, FL 32174 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: ANASYMONE TARDOUS

09/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: GM () Delete
Name: MAYER, ADAM R
Address: 1425 HAND AVE SUITE N
City-St-Zip: ORMOND BEACH, FL 32174

Title: MM () Delete
Name: MAYER, BARRY H
Address: 1400 HAND AVE SUITE K
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TADROUS, ANASYMONE
Address: 1425 HAND AVE SUITE N
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM (X) Change () Addition
Name: TADROUS, MAGDY
Address: 1425 HAND AVE STE N
City-St-Zip: ORMOND BEACH, FL 32174

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: ANASYMONE TARDOUS

MGR

09/11/2009

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