

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

**FILED**  
**May 29, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90088 001 \*\*\*416.25

DOCUMENT # L07000061843  
 1. Entity Name  
**PUFF'N STUFF CATERING AT CHURCH STREET STATION, LLC**



Principal Place of Business Mailing Address  
 250 RIO DRIVE 250 RIO DRIVE  
 ORLANDO FL 32810 ORLANDO FL 32810



2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E083 (10/07)

City & State City & State  
 Zip Country Zip Country

4. FEI Number Applied For  
 Not Applicable  
 5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
**DIETEL, WARREN**  
**250 RIO DRIVE**  
**ORLANDO FL 32810**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature required on each name of registered agent and on the 1 applicable (NOTE: Registered Agent signature required when reorganizing)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008, Fee Will Be \$538.75**  
**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>MBEM</b> <b>Dieta, Warren G</b> <b>2991 Temple Drive</b> <b>Winder Park, FL 32789</b>	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: \_\_\_\_\_ Date: **4/14/08**