

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000029989

FILED  
Jun 24, 2009  
Secretary of State

**Entity Name:** DOWNTIME PIZZA AND SUBS L.L.C.

**Current Principal Place of Business:**

1056 BRYN MAWR BLVD  
MARY ESTHER, FL 32569

**New Principal Place of Business:**

**Current Mailing Address:**

1056 BRYN MAWR BLVD  
MARY ESTHER, FL 32569

**New Mailing Address:**

**FEI Number:** 32-0245475      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

LEONARD, JENNIFER  
1056 BRYN MAWR BLVD  
MARY ESTHER, FL 32569      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LEONARD, TODD  
Address: 1056 BRYN MAWR BLVD  
City-St-Zip: MARY ESTHER, FL 32569

Title: MGR      ( ) Delete  
Name: LEONARD, JENNIFER  
Address: 1056 BRYN MAWR BLVD  
City-St-Zip: MARY ESTHER, FL 32569

**ADDITIONS/CHANGES:**

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: JENNIFER LEONARD

MMBR

06/24/2009

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