

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000021364

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Entity Name:** PEEL 1, LLC

**Current Principal Place of Business:**

8810 TWIN LAKES RD  
TAMPA, FL 33614

**New Principal Place of Business:**

8810 TWIN LAKES RD  
TAMPA, FL 33614 US

**Current Mailing Address:**

8810 TWIN LAKES RD  
TAMPA, FL 33614

**New Mailing Address:**

8810 TWIN LAKES RD  
TAMPA, FL 33614 US

**FEI Number:** 26-4386863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOWLER WHITE BOGGS P.A.  
HUNTER J BROWNLEE  
501 E KENNEDY BLVD - STE 1700  
TAMPA, FL 33602 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: PEEL RESTAURANTS, INC  
Address: 8810 TWIN LAKES BLVD  
City-St-Zip: TAMPA, FL 33614 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: ROBERT JOHNSTON

MGRM

04/09/2010

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