

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90009 003 ****55.00

DOCUMENT # L99000000559

1. Entity Name

HOPS OF BALTIMORE COUNTY, LLC

Principal Place of Business

**C/O HOPS GRILL & BAR, INC.
 2701 NORTH ROCKY POINT DRIVE, SUITE 300
 TAMPA FL 33607**

Mailing Address

**C/O HOPS GRILL & BAR, INC.
 2701 NORTH ROCKY POINT DRIVE, SUITE 300
 TAMPA FL 33607**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3558578**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
CEO
MAGRUDER, RONALD ☐ Delete
2701 NORTH ROCKY POINT DRIVE, SUITE 300
TAMPA FL 33607

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
WALDREP, MARGARET ☐ Delete
HANCOCK AT WASHINGTON
MADISON GA 30650

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
President, Director ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
BOOTH, ERICH J ☒ Delete
HANCOCK AT WASHINGTON
MADISON GA 30650

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
DUPREE, TOM E JR ☒ Delete
HANCOCK AT WASHINGTON
MADISON GA 30650

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
T
KOLLIAS, ZACHARIAS ☐ Delete
2701 N ROCKY POINT DR., STE 300
TAMPA FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S
WILLIAMS, PERCY ☐ Delete
HANCOCK AT WASHINGTON
MADISON GA

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

4/8/02

813-282-9350

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)