

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001609

FILED
Mar 27, 2006
Secretary of State

Entity Name: CHEESEBURGER IN PARADISE, LLC

Current Principal Place of Business:

2202 NORTH WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2202 NORTH WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3671653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KADOW, JOSEPH J
2202 NORTH WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607 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: MGR () Delete
Name: ALLEN, A. WILLIAM III
Address: 2202 NORTH WESTSHORE BLVD., 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: MGR () Delete
Name: AVERY, PAUL E
Address: 2202 NORTH WESTSHORE BLVD., 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: MGR () Delete
Name: MERRITT, ROBERT S
Address: 2202 NORTH WESTSHORE BLVD., 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: MGR () Delete
Name: BUFFETT, JIMMY
Address: 2202 N. WESTSHORE BLVD, 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: MGR () Delete
Name: COLAN, JOHN
Address: 2202 N. WESTSHORE BLVD, 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPT (X) Change () Addition
Name: MONTGOMERY, DIRK A
Address: 2202 NORTH WESTSHORE BLVD., 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: P (X) Change () Addition
Name: PRESCOTT, DENNIS L
Address: 2202 N WEST SHORE BLVD., 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

Title: VPS (X) Change () Addition
Name: KADOW, JOSEPH J
Address: 2202 N. WESTSHORE BLVD, 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the 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: A WILLIAM ALLEN, III

MGR

03/27/2006

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