

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001447

FILED
Mar 06, 2007
Secretary of State

Entity Name: SW FLORIDA RESTAURANT HOLDINGS, LLC

Current Principal Place of Business:

2800 LASALLE PLAZA, 800 LASALLE AVENUE
MINNEAPOLIS, MN 55402

New Principal Place of Business:

Current Mailing Address:

2800 LASALLE PLAZA, 800 LASALLE AVENUE
MINNEAPOLIS, MN 55402

New Mailing Address:

FEI Number: 72-1560029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINS, KAPLAN, MILLER & CIRESI L.L.P.
711 - FIFTH AVENUE SOUTH, SUITE 201
NAPLES, FL 341026628 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 () Delete
Name: CIRESI, MICHAEL
Address: 2800 LASALLE PLAZA, 800 LASALLE AVENUE
City-St-Zip: MINNEAPOLIS, MN 55402

Title: MGRM () Delete
Name: RYAN, JOSEPH
Address: 5125 CITY RD 101 STE 100
City-St-Zip: MINNETONKA, MN 55345

Title: MGRM () Delete
Name: CONLIN, JAN M
Address: 2800 LASALLE PLAZA 800 LASALLE AVE
City-St-Zip: MINNEAPOLIS, MN 55402

ADDITIONS/CHANGES:

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

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 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: JAN M. CONLIN

MGRM

03/06/2007

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