

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000001893

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** OUTBACK CATERING DESIGNATED PARTNER, LLC

**Current Principal Place of Business:**

2202 N WEST SHORE BLVD., 5TH FLOOR  
LEGAL DEPT  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2202 N WEST SHORE BLVD., 5TH FLOOR  
LEGAL DEPT  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 20-8719164

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KADOW, JOSEPH J  
2202 N WEST SHORE BLVD., 5TH FLOOR  
LEGAL DEPT  
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: MGRM  
Name: OUTBACK CATERING, INC.  
Address: 2202 N WEST SHORE BLVD., 5TH FLOOR  
City-St-Zip: TAMPA, FL 33607

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: JOSEPH J. KADOW

MANA

04/07/2010

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