

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000006715

**FILED**  
**Mar 03, 2012**  
**Secretary of State**

**Entity Name:** S.B. RESTAURANT CO. OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

200 EAST BAKER STREET.  
SUITE 201  
COSTA MESA, CA 92626 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 EAST BAKER STREET.  
SUITE 201  
COSTA MESA, CA 92626 US

**New Mailing Address:**

**FEI Number:** 26-1430207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: HOLDEN, ROBERT A  
Address: 200 EAST BAKER STREET, SUITE 201  
City-St-Zip: COSTA MESA, CA 92626 US

Title: MGR  
Name: POTVIN, PAUL R  
Address: 200 EAST BAKER STREET, SUITE 201  
City-St-Zip: COSTA MESA, CA 92626 US

Title: MGR  
Name: KARP, ALLAN  
Address: 104 FIELD POINT ROAD  
City-St-Zip: GREENWICH, CT 06830 US

Title: MGR  
Name: REILLY, CHRISTOPHER  
Address: 104 FIELD POINT ROAD  
City-St-Zip: GREENWICH, CT 06830 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: PAUL R. POTVIN

CFO

03/03/2012

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