

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000003970

Entity Name: EAT 503, LLC

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

56 CENTRAL AVENUE, SUITE 201  
ASHEVILLE, NC 28801 US

**New Principal Place of Business:**

**Current Mailing Address:**

56 CENTRAL AVENUE, SUITE 201  
ASHEVILLE, NC 28801 US

**New Mailing Address:**

FEI Number: 23-0691670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: BAILEY, JAMES W  
Address: 56 CENTRAL AVENUE, SUITE 201  
City-St-Zip: ASHEVILLE, NC 28801 US

Title: MGRM  
Name: PRICE, TERRY  
Address: 56 CENTRAL AVENUE, SUITE 201  
City-St-Zip: ASHEVILLE, NC 28801 US

Title: P  
Name: HOLDER, GEORGE H  
Address: 301 S. CAMERON STREET  
City-St-Zip: HARRISBURG, PA 17101 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: LINDA L. RITTEL

AS

02/08/2012

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