

FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 MAY -2 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE
\$ 203.75
Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company
DOCUMENT #M96000000245
DINING AND ENTERTAINMENT CLUBS OF AMERICA,
L.L.C.
~~2240 HERON CIRCLE~~
~~CLEARWATER FL 34622~~

1a. Principal Place of Business Address

~~2240 HERON CIRCLE~~
~~CLEARWATER FL 34622~~

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business
9331 Adamo Dr.
Suite, Apt. #, etc.
City & State
Tampa FL
Zip
33619 Country
USA

2a. Mailing Address
P.O. Box 982
Suite, Apt. #, etc.
City & State
Seffner FL
Zip
33583 Country
USA

3. Date Organized or Qualified
07/08/1996 3a. State of Formation
RI

4. FEI Number
59-3306564 ☐ Applied For
☐ Not Applicable

5. Date of Last Report
N/A 6. Certificate of Status Desired
☐ No Additional Fee Required

7. Name and Address of Current Registered Agent

ELSER, BRIAN E
~~2240 HERON CIRCLE~~
~~CLEARWATER FL 34622~~

8. Name and Address of New Registered Agent

Name
Brian E. Elser
Street Address (P.O. Box Number is Not Acceptable)
9331 Adamo Dr.
Suite, Apt. #, etc.
City
Tampa FL Zip Code
33619

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE *Brian E. Elser* DATE **3-20-97**
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	ELSER, SAMMIE H	2240 HERON CIRCLE	CLEARWATER FL, 34622
MGR	ELSER, ARLOE E	450 E. HAMILTON LANE	BATTLE CREEK MI, 49015
100002172381--1 -05/08/97--01155--017 ****203.75 ****203.75 985-7-97			

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *Arlon E. Elser* **ARLOE E. ELSER** 3-24-97 646-968-3212
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #