

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028431

FILED
Apr 16, 2009
Secretary of State

Entity Name: ST. JOHNS RESTAURANT MANAGEMENT COMPANY

Current Principal Place of Business:

7546 BEACH BLVD
JACKSONVILLE, FL 32217

New Principal Place of Business:

7546 BEACH BLVD
JACKSONVILLE, FL 32216

Current Mailing Address:

PO BOX 550860
JACKSONVILLE, FL 32255

New Mailing Address:

FEI Number: 59-3653507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, DANIEL D
ONE INDEPENDENT DR., SUITE 2301
JACKSONVILLE, FL 32202 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RUKAB, ROBERT
Address: 8326 RIDING CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: RUKAB-GRASSI, LORI
Address: 12465 IVEY WOODS CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: FARAH, GREG
Address: 9379 JAYBIRD CIR E
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: FARAH, MUNA
Address: 9379 JAYBIRD CIR E
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUKAB, ROBERT
Address: 8326 RIDING CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: RUKAB-GRASSI, LORI
Address: 12465 IVEY WOODS CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: T (X) Change () Addition
Name: FARAH, GREG
Address: 9379 JAYBIRD CIR E
City-St-Zip: JACKSONVILLE, FL 32257

Title: S (X) Change () Addition
Name: FARAH, MUNA
Address: 9379 JAYBIRD CIR E
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT RUKAB

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date