

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000083687

Entity Name: CJR RESTAURANTS INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

2926 LITTLE RD.
TRINITY, FL 34655

New Principal Place of Business:

Current Mailing Address:

18539 BITTERN AVE.
LUTZ, FL 33558 US

New Mailing Address:

FEI Number: 20-5144121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLMES, CHRISTOPHER H
18539 BITTERN AVE.
LUTZ, FL 33558 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: P () Delete
Name: HOLMES, CHRISTOPHER H
Address: 18539 BITTERN AVE
City-St-Zip: LUTZ, FL 33558 US

Title: VP () Delete
Name: KUMMERS, ROBERT E
Address: 18539 BITTERN AVE
City-St-Zip: LUTZ, FL 33558 US

Title: VP () Delete
Name: HOLMES, JAMES E
Address: 5021 36TH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: VP () Delete
Name: KUMMERS, ROBERT J
Address: 18539 BITTERN AVE
City-St-Zip: LUTZ, FL 33558 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HOLMES, JAMES E
Address: 10267 117TH TERRACE DR
City-St-Zip: LARGO, FL 33773 US

Title: VP (X) Change () Addition
Name: KUMMERS, ROBERT J
Address: 3606 CARROLLWOOD PL CR. APT.207
City-St-Zip: TAMPA, FL 33624 US

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: CHRISTOPHER H HOLMES

P

02/06/2009

Electronic Signature of Signing Officer or Director

_____ Date