

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061940

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: COURTSIDE GRILLE MANAGEMENT II, INC.

## Current Principal Place of Business:

13901 NINE EAGLES DRIVE  
TAMPA, FL 33626 US

## New Principal Place of Business:

11941 ROYCE WATERFORD CIRCLE  
TAMPA, FL 33626 US

## Current Mailing Address:

13901 NINE EAGLES DRIVE  
TAMPA, FL 33626 US

## New Mailing Address:

P.O. BOX 1368  
CLEARWATER, FL 337571368 US

FEI Number: 26-0586307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEAVENRIDGE, DAVID G PRES  
13901 NINE EAGLES DRIVE  
TAMPA, FL 33626 US

## Name and Address of New Registered Agent:

HEAVENRIDGE, DAVID G  
13901 NINE EAGLES DRIVE  
TAMPA, FL 33626 US

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: DAVID G. HEAVENRIDGE

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: HEAVERRIDGE, DAVID G  
Address: 11941 ROYCE WATERFORD CIRCLE  
City-St-Zip: TAMPA, FL 33626 US

Title: VP ( ) Delete  
Name: FRIEDMAN, ANDREW  
Address: 1911 MAGNOLIA DRIVE  
City-St-Zip: CLEARWATER, FL 33764

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: FRIEDMAN, ANDREW  
Address: 1911 MAGNOLIA DRIVE  
City-St-Zip: CLEARWATER, FL 33764 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: DAVID G. HEAVENRIDGE

PSTD

04/22/2009

Electronic Signature of Signing Officer or Director

Date