2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007
Secretary of State

DOCUMENT# P39684

Entity Name: OSI RESTAURANT PARTNERS, INC.

Current Principal Place of Business:

2202 N. WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

2202 N. WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 59-3061413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KADOW, JOSEPH
2202 N. WESTSHORE BLVD., 5TH FLOOR
TAMPA, FL 33607 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:	CEOD	( ) Delete
Name:	ALLEN, A . WILLIAM III	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	COOD	( ) Delete
Name:	AVERY, PAUL E	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	SVPS	( ) Delete
Name:	KADOW, JOSEPH	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	D	( ) Delete
Name:	SULLIVAN, CHRIS T	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	VPAS	( ) Delete
Name:	LEFFERTS, KELLY B	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	CFOV	( ) Delete
Name:	MONTGOMERY, DIRK A	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	COO	(X) Change ( ) Addition
Name:	AVERY, PAUL E	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:	EVPS	(X) Change ( ) Addition
Name:	KADOW, JOSEPH	
Address:	2202 N. WESTSHORE BLVD., 5TH FLOOR	
City-St-Zip:	TAMPA, FL 33607 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH J. KADOW EVPS 01/24/2007
Electronic Signature of Signing Officer or Director Date