

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000029857

FILED
Apr 08, 2010
Secretary of State

Entity Name: HOOTERS OF CYPRESS CREEK, INC.

Current Principal Place of Business:

6345 N ANDREWS AVE
FT LAUDERDALE, FL 33901

New Principal Place of Business:

Current Mailing Address:

4411 CLEVELAND AVENUE
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 65-0729126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMEONE, RICHARD J
4411 CLEVELAND AVENUE
FT MYERS, FL 33901 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: CEO
Name: LAGESCHULTE, DAVID L.
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: DST
Name: LYNCH, PAUL
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: DP
Name: BRAWNER, TERRY
Address: 4411 CLEVELAND AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: KLINGENSMITH, KIT A
Address: 4411 CLEVELAND AVE
City-St-Zip: FT MYERS, FL 33901

Title: D
Name: REGNIER, DALE R.
Address: 4411 CLEVELAND AVE
City-St-Zip: FT MYERS, FL 33901

Title: VP
Name: LYNCH, PAUL W.
Address: 4411 CLEVELAND AVE
City-St-Zip: FT MYERS, FL 33901

I hereby 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 all other like empowered.

SIGNATURE: PAUL LYNCH

VP

04/08/2010

Electronic Signature of Signing Officer or Director

Date