

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000036582

FILED
Jan 31, 2004
Secretary of State

Entity Name: GAINESVILLE RESTAURANT GROUP INC.

Current Principal Place of Business:

5115 NW 39 AVE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

4613 OAK HAMMOCK CT.
HARBOUR VILLAGE
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: 59-3389897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGAN, DONALD J
HARBOUR VILLAGE
4613 OAK HAMMOCK COURT
PONCE INLET, FL 32127 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: PD () Delete
Name: REGAN, DONALD J
Address: 4421 NW 36 DR
City-St-Zip: GAINESVILLE, FL 32605

Title: TD () Delete
Name: REGAN, LAURE K
Address: 4421 NW 36 DR
City-St-Zip: GAINESVILLE, FL 32605

Title: VP (X) Delete
Name: YOUNG, DONALD G
Address: 14501 NW 153 TERR
City-St-Zip: ALACHUA, FL 32616

Title: VP () Delete
Name: AKEY, MICHAEL J
Address: 941 NW 118TH TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: AS () Delete
Name: FENNELL, CHRISTOPHER
Address: 5121 NW 29 LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: AT (X) Delete
Name: GENSER, DINO
Address: 507 NW 39RD #138
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Section 119.07(3)(i), 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: DONALD J REGAN

PRES

01/31/2004

Electronic Signature of Signing Officer or Director

_____ Date