

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000041335

**Entity Name:** HOOTERS OF COUNTRYSIDE, INC.**Current Principal Place of Business:**107 HAMPTON ROAD  
SUITE 200  
CLEARWATER, FL 33759**Current Mailing Address:**107 HAMPTON ROAD  
SUITE 200  
CLEARWATER, FL 33759**FEI Number:** 46-2751965**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KIEFER, NEIL G  
107 HAMPTON ROAD  
SUITE 200  
CLEARWATER, FL 33759 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	KIEFER, NEIL G
Address	1250 MONTICELLO BOULEVARD N
City-State-Zip:	ST. PETERSBURG FL 33703

Title	ST
Name	CLARK, BRUCE W
Address	2125 PINNACLE CIRCLE SOUTH
City-State-Zip:	PALM HARBOR FL 34684

Title	D
Name	JOHNSON, DENNIS
Address	277 ABERDEEN STREET
City-State-Zip:	DUNEDIN FL 34698

Title	VPD
Name	DIGIANNANTONIO, GILBERT
Address	125 BELLEVIEW BOULEVARD #605
City-State-Zip:	BELLEAIR FL 33756

Title	D
Name	DROSTE, EDWARD C
Address	20 MIDWAY ISLAND
City-State-Zip:	CLEARWATER FL 33767

Title	D
Name	MELILLI, SALVATORE J.
Address	4076 GARDEN AVENUE
City-State-Zip:	WESTERN SPRINGS IL 60558

*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:** NEIL G. KIEFER**PRESIDENT****02/03/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date