## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002169

Entity Name: 27 RESTAURANT COMPANY, LLC

**Current Principal Place of Business:** 

943 S.E. FORT KING STREET

OCALA, FL 34471

**Current Mailing Address:** 

P.O. BOX 3778 OCALA, FL 34478

FEI Number: 59-3630978 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMP, GENE B 943 S.E. FORT KING STREET OCALA, FL 34471 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

FILED Feb 24, 2014

**Secretary of State** 

CC3731857938

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameCAMP, GENE BNameFORE, MERRITT CJRAddress943 SE FT KING STREETAddress943 SE FT KING

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34471

Title MGRM Title MGRM

 Name
 FORE, MERRITT CIII
 Name
 CAMP, KEVIN B

 Address
 943 SE FT KING ST
 Address
 943 SE FT KING

 City-State-Zip:
 OCALA FL 34471
 City-State-Zip:
 OCALA FL 34471

Title MGRM Title MGRM

Name CLIFFORD, KRISTEN C Name FORE, MAC P

Address 943 SE FT KING STREET Address 943 SE FT KING STREET

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34471

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GENE B. CAMP MGRM 02/24/2014