

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000108608

Entity Name: MILLENNIAL RESTAURANT GROUP, LLC**Current Principal Place of Business:**215 FIFTH STREET SUITE 100
WEST PALM BEACH, FL 33401**Current Mailing Address:**10000 SHELBYVILLE RD, STE 100
LOUISVILLE, KY 40223 US**FEI Number:** 46-3468053**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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**Authorized Person(s) Detail :**

Title	PRESIDENT
Name	ALBRITTON, WAYNE
Address	10000 SHELBYVILLE RD, STE 100
City-State-Zip:	LOUISVILLE KY 40223

Title	VP
Name	PATTERSON, JAMES A II
Address	10000 SHELBYVILLE RD, STE 100
City-State-Zip:	LOUISVILLE KY 40223

Title	CFO
Name	DIERUF, THOMAS A
Address	10000 SHELBYVILLE RD, STE 100
City-State-Zip:	LOUISVILLE KY 40223

Title	VICE PRESIDENT - DEVELOPMENT
Name	COGAN, KEVIN C
Address	10000 SHELBYVILLE RD, STE 100
City-State-Zip:	LOUISVILLE KY 40223

Title	SECRETARY
Name	LOWE, CHARLOTTE E
Address	10000 SHELBYVILLE RD, STE 100
City-State-Zip:	LOUISVILLE KY 40223

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: THOMAS A. DIERUF

CFO

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date