

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000171699

**Entity Name:** LAKELAND RESTAURANT GROUP, LLC

**Current Principal Place of Business:**

2335 SEBAGO DRIVE  
LAKELAND, FL 33803

**Current Mailing Address:**

2335 SEBAGO DRIVE  
LAKELAND, FL 33805

**FEI Number: 85-1625341**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NJUBI, PATRICK  
2335 SEBAGO DRIVE  
LAKELAND, FL 33805 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 AP  
Name NJUBI, PATRICK  
Address 2335 SEBAGO DRIVE  
City-State-Zip: LAKELAND FL 33805

Title AP  
Name BARROW, TODD N  
Address 134 MIRAMAR ROAD  
City-State-Zip: LAKELAND FL 33803

Title AP  
Name DOBBS, JASON E  
Address 211 BIRCH LANE  
City-State-Zip: LAKELAND FL 33813

Title AP  
Name KIMSEY, KEITH M  
Address 616 VICTORIA SQUARE LANE  
City-State-Zip: LAKELAND FL 33813

Title AP  
Name POWERS, JAMES B  
Address 1425 SEVILLE PLACE  
City-State-Zip: LAKELAND FL 33803

Title AP  
Name ROTH, CRAIG H  
Address 6251 FORESTWOOD DRIVE EAST  
City-State-Zip: LAKELAND FL 33803

*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: PATRICK NJUBI**

**MANAGER**

**03/02/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date