



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$50.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2009

**1. ID No.** 000272803

**2. Exact Name of the Limited Liability Company** OSI/Fleming's, LLC

**3. State of Formation**

State: DE

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

FULL SERVICE RESTAURANT

**5. Principal Office Address**

No. and Street: 2202 N WEST SHORE BOULEVARD, 5TH FLOOR

City or Town: TAMPA

State: FL Zip: 33607 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: Contact Title:

No. and Street: 2202 N WEST SHORE BOULEVARD, 5TH FLOOR

LEGAL DEPT

City or Town: TAMPA

State: FL Zip: 33607 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
MANAGER	CHRIS SULLIVAN	2202 N SHORE BOULEVARD, 5TH FLOOR TAMPA, FL 33607 USA
MANAGER	A WILLIAM ALLEN, III	2202 N WEST SHORE BLVD., 5TH FL TAMPA, FL 33607 USA
MANAGER	PAUL M FLEMING	2202 N WEST SHORE BLVD., 5TH FL TAMPA, FL 33607 USA
MANAGER	CURTIS H FOX	2202 N WEST SHORE BLVD., 5TH FL TAMPA, FL 33607 USA
MANAGER	NANCY SCHNEID	2202 N WEST SHORE BLVD., 5TH FL TAMPA, FL 33607 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 155 SOUTH MAIN STREET, SUITE 301 PROVIDENCE , RI 02903

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 12 Day of October, 2009 at 10:03:56 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By A. WILLIAM ALLEN, III  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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