2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# F00000003432

Entity Name: CNL RESTAURANT CAPITAL CORP.

Current Principal Place of Business:

450 S. ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

450 S. ORANGE AVENUE
ORLANDO, FL 32801

New Mailing Address:

201 MERRITT 7
NORWALK, CT 06851

FEI Number: 59-3650065 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: FARREN, JOHN F
Address: 450 SOUTH ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: DP ( ) Delete
Name: KOWALSKE, DARREN A
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: DT ( ) Delete
Name: TROTTER, BRADLEY
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: VP ( ) Delete
Name: MILLS, ROSEMARY Q
Address: 450 S. ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: VP ( ) Delete
Name: MARTIN, CAROLYN C
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPAS (X) Change ( ) Addition
Name: DIETZ, PATRICIA
Address: 201 MERRITT 7
City-St-Zip: NORWALK, CT 06851

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change ( ) Addition
Name: RICHARDS, JAMES D
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: DR (X) Change ( ) Addition
Name: D'HOORE, STEFAAN
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA DIETZ VPAS 04/27/2009

Electronic Signature of Signing Officer or Director Date