## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000007212

**Current Principal Place of Business:** 

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

EVP

VPTD

(X) Delete

(X) Delete

4288 W DUBLIN-GRANVILLE RD.

(X) Delete

4288 W DUBLIN-GRANVILLE RD

CATHERWOOD, JOHATHAN F

4288 W DUBLIN GRANVILLE RD

ANDERSON, KERRII B

**DUBLIN. OH 43017** 

DUBLIN, OH 43017

MAYER, ROBERT A

**DUBLIN. OH 43017** 

Entity Name: BFWV FRANCHISE CORP.

FILED Apr 27, 2007 Secretary of State

**New Principal Place of Business:** 

4288 W DUBLIN GRANVILLE RD 2000 WINSTON ROAD P.O. BOX 256, ATTN: TAX DEPT ANAHEIM, CA 92806 US **DUBLIN, OH 43017 New Mailing Address: Current Mailing Address:** 4288 W DUBLIN GRANVILLE RD 2000 WINSTON ROAD P.O. BOX 256, ATTN: TAX DEPT ANAHEIM, CA 92806 US DUBLIN, OH 43017 FEI Number: 95-4330716 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition GRUBE, BRION G KIM, DAVID Name: Name: 4288 W DUBLIN GRANVILLE RD 2000 WINSTON ROAD Address: Address: **DUBLIN, OH 43017** City-St-Zip: City-St-Zip: ANAHEIM, CA 92806 US SVPD (X) Delete Title: Title: () Change () Addition Name: GALLAGHER, EVERETT E JR. Name: 4288 W DUBLIN-GRANVILLE RD. Address: Address: **DUBLIN, OH 43017** City-St-Zip: City-St-Zip: (X) Delete Title: Title: **EVPS** () Change () Addition MCCORKLE, LEON M JR Name: Name: 4288 W DUBLIN-GRANVILLE ROAD Address: Address: City-St-Zip: DUBLIN, OH 43017 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.

Title:

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID KIM P 04/27/2007

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