

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90017 009 \*\*\*550.00

**DOCUMENT # F94000000192**

1. Entity Name  
**SPARDEE'S REALTY, INC.**

Principal Place of Business 1233 HARDEE'S BLVD ATTN: SANDY WINSTEAD-TAX ROCKY MOUNT NC 27804 US	Mailing Address PO BOX 1619-TAX ATTN: SANDY WINSTEAD ROCKY MOUNT NC 27802-1619 US
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2. Principal Place of Business <b>401 Carl Karcher Way</b>	3. Mailing Address <b>P.O. Box 4349</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State <b>Anaheim, CA</b>	City & State <b>Anaheim, CA</b>	4. FEI Number <b>58-1864855</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>92801</b>	Country <b>USA</b>	Zip <b>92803</b>	Country <b>USA</b>

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND RD.**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>MURPHY, RORY J</b>	
STREET ADDRESS	<b>1233 HARDEE'S BLVD</b>	
CITY-ST-ZIP	<b>ROCKY MOUNT NC 27804</b>	
TITLE	<b>SVCF</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>SPEED, JAMES H</b>	
STREET ADDRESS	<b>1233 HARDEE'S BLVD</b>	
CITY-ST-ZIP	<b>ROCKY MOUNT NC 27804</b>	
TITLE	<b>CEO</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>THOMPSON, C. THOMAS</b>	
STREET ADDRESS	<b>1200 N HARBOR BLVD</b>	
CITY-ST-ZIP	<b>ANAHEIM CA 92803</b>	
TITLE	<b>SVSE</b>	<input type="checkbox"/> Delete
NAME	<b>MURPHY, E. MICHAEL</b>	
STREET ADDRESS	<b>1233 HARDEE'S BLVD</b>	
CITY-ST-ZIP	<b>ROCKY MOUNT NC 27804</b>	
TITLE	<b>VPC</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>ATKINSON, MARY BETH</b>	
STREET ADDRESS	<b>1233 HARDEE'S BLVD</b>	
CITY-ST-ZIP	<b>ROCKY MOUNT NC 27804</b>	
TITLE	<b>TR</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>KALEEL, STUART</b>	
STREET ADDRESS	<b>1233 HARDEE'S BLVD</b>	
CITY-ST-ZIP	<b>ROCKY MOUNT NC 27804</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>CEO &amp; President</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Andrew F. Puzder</b>	
STREET ADDRESS	<b>4050 Calle Real</b>	
CITY-ST-ZIP	<b>Santa Barbara, CA 93110</b>	
TITLE	<b>Sr. V.P./CFO</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Kathryn S. Polson</b>	
STREET ADDRESS	<b>401 W. Carl Karcher Way</b>	
CITY-ST-ZIP	<b>Anaheim, CA 92801</b>	
TITLE	<b>Exec. V.P., Rest. Ops</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Rory J. Murphy</b>	
STREET ADDRESS	<b>401 W. Carl Karcher Way</b>	
CITY-ST-ZIP	<b>Anaheim, CA 92801</b>	
TITLE	<b>Sr. V.P., General Counsel &amp; Secretary</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>E. Michael Murphy</b>	
STREET ADDRESS	<b>4050 Calle Real Ste 220</b>	
CITY-ST-ZIP	<b>Santa Barbara, CA 93110</b>	
TITLE	<b>Exec. V.P./CAO</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>John J. Dunion</b>	
STREET ADDRESS	<b>401 W. Carl Karcher Way</b>	
CITY-ST-ZIP	<b>Anaheim, CA 92801</b>	
TITLE	<b>Sr. V.P.</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Robert A. Wilson</b>	
STREET ADDRESS	<b>401 W. Carl Karcher Way</b>	
CITY-ST-ZIP	<b>Anaheim, CA 92801</b>	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **REQUIRED** 8-2-00 (714) 774-5796  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)