

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED
 AND
 FILED
 10/3

98 SEP 16 PM 2:44

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **994000016443**
 1. Corporation Name
SOUTH ORT CORP

Principal Place of Business
**5898 S. ORANGE BLOSSOM TRAIL
 ORLANDO, FL 32839**

Mailing Address
**P.O. BOX 99900
 LOUISVILLE, KY
 40269**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/28/94

4. FEI Number
59-3236496

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25 Country

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent

**A.G.C. CO.
 2300 SUN BANK CENTER
 200 S. ORANGE AVENUE
 ORLANDO, FL**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
50002639485-3

83 **09715798-01035-004**
******158.75 ****158.75**

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	PD PETERS, CHARLES
STREET ADDRESS		1.3 STREET ADDRESS	5898 S. ORANGE BLOSSOM TRAIL
CITY - ST - ZIP		1.4 CITY - ST - ZIP	ORLANDO, FL 32839
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	VD ONEY, WADES.
STREET ADDRESS		2.3 STREET ADDRESS	5898 S. ORANGE BLOSSOM TRAIL
CITY - ST - ZIP		2.4 CITY - ST - ZIP	ORLANDO, FL 32839
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	TD HARBER, KAREN
STREET ADDRESS		3.3 STREET ADDRESS	5898 S. ORANGE BLOSSOM TRAIL
CITY - ST - ZIP		3.4 CITY - ST - ZIP	ORLANDO, FL 32839
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	AS HENDRICK, CHARLOTTE L.
STREET ADDRESS		4.3 STREET ADDRESS	11492 BLUEGRASS PKWY.
CITY - ST - ZIP		4.4 CITY - ST - ZIP	LOUISVILLE, KY. 40299
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

Signature: *[Handwritten Signature]*

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charlotte L. Hendrick* 9/1/98 (502) 211-5200

CR2E034 (5/98)

2063



Better Ingredients.
Better Pizza.

September 8, 1998

Ms. Trevor Brumbley
Florida Department of State
Division of Corporations
Reinstatement Division
409 E. Gains Street
Tallahassee, FL 32399

Re: South OBT Corp. 1998 Annual Report Filing


Dear Ms. Brumbley:

Per our phone conversation, I enclose the Annual Report for South OBT Corp., and a check to cover the filing fee. I have also enclosed a copy of a letter which I sent to you on August 21, explaining the details of the misunderstanding that occurred in filing this report.

Please contact me at (502)261-4283 if you have any questions regarding this matter. I appreciate your assistance. Thanks again.

Very truly yours,

PAPA JOHN'S INTERNATIONAL, INC.


Michele D. Lerner
Corporate Paralegal



Better Ingredients.
Better Pizza.

August 21, 1998

Ms. Trevor Brumbley
Florida Department of State
Division of Corporations
Reinstatement Division
409 E. Gains Street
Tallahassee, FL 32399

Re: South OBT Corp. 1998 Annual Report Filing

Dear Ms. Brumbley:

Per our phone conversation, I enclose for your review two letters, and a copy of the check associated with the above-referenced filing.

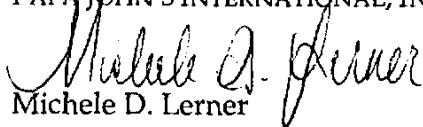
The first letter, dated April 23, 1998, accompanied the 1998 Annual Report and the \$158.75 filing fee. In this letter, I requested a filed copy of the Annual Report for the corporation's minute book. After a few months passed and I did not receive this filed copy, I called your office and was informed that the Annual Report and check were never received by your office.

Then, I contacted our accounting department to inquire as to whether the check for the filing fee had been cashed. They informed me that it had been cashed by your office, on May 5, 1998. I called your office once again and explained that the check had been cashed. I was instructed to send a copy of the check to the attention of the Reinstatement Division and informed that the Annual Report would be tracked down via the check (refer to the second letter).

Please research this matter and ensure that it is resolved. If you have any further questions, please contact me at (502)261-4283. I appreciate your assistance.

Very truly yours,

PAPA JOHN'S INTERNATIONAL, INC.


Michele D. Lerner
Corporate Paralegal