

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 13 AM 11:25

DOCUMENT # **P38545** (0)

1. Corporation Name

**MRS. FIELDS DEVELOPMENT CORPORATION**

Principal Place of Business

333 MAIN STREET  
PARK CITY UT 84060

Mailing Address

333 MAIN STREET  
PARK CITY UT 84060

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified **04/28/1992** 3a. Date of Last Report **02/03/1994**

4. FEI Number **87-0481272** Applied For  Not Applicable

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 has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

**FL** B5 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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**  
NAME **FIELDS, DEBRA J.**  
STREET ADDRESS **333 MAIN STREET**  
CITY-ST-ZIP **PARK CITY UT**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **P**  
NAME **FEY, THOMAS H**  
STREET ADDRESS **333 MAIN ST**  
CITY-ST-ZIP **PARK CITY UT**

2.1 TITLE **President**  Change  Addition  
2.2 NAME **Larry A. Hodges**  
2.3 STREET ADDRESS **333 Main Street**  
2.4 CITY-ST-ZIP **Park City, UT 84060**

TITLE **V**  
NAME **PIERCE, L. TIM**  
STREET ADDRESS **333 MAIN STREET**  
CITY-ST-ZIP **PARK CITY UT**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **S**  
NAME **CLISSOLD, EDWARD L.**  
STREET ADDRESS **333 MAIN STREET**  
CITY-ST-ZIP **PARK CITY UT**

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **D**  
NAME **FEY, THOMAS H**  
STREET ADDRESS **333 MAIN STREET**  
CITY-ST-ZIP **PARK CITY UT**

5.1 TITLE **Director**  Change  Addition  
5.2 NAME **Larry A. Hodges**  
5.3 STREET ADDRESS **333 Main Street**  
5.4 CITY-ST-ZIP **Park City, UT 84060**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME **Gilbert C. Osnos**  
6.3 STREET ADDRESS **333 Main Street**  
6.4 CITY-ST-ZIP **Park City, UT 84060**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

*E. L. Clissold*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**E. L. Clissold 2-7-95**

**801-645-2349**