

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 15 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **834329**

1. Corporation Name
WHATABURGER, INC.

Principal Place of Business
**4600 PARKDALE DRIVE
CORPUS CHRISTI TX 78411-9981**

Mailing Address
**4600 PARKDALE DRIVE
CORPUS CHRISTI TX 78411-9981**

REINSTATEMENT 02



600009030586
11/15/02--01094--018 **750.00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc. <i>One Whataburger Way</i>		Suite, Apt. #, etc.		05/14/1975	
City & State <i>Corpus Christi, TX</i>		City & State		5. FEI Number 74-1693771	
Zip <i>78411</i>		Country <i>USA</i>		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DOBSON, G. W.	4600 PARKDALE <i>One Whataburger Way</i>	CORPUS CHRISTI TX
VST	MCLELLAN, J.M.	4600 PARKDALE <i>One Whataburger Way</i>	CORPUS CHRISTI TX
CD	DOBSON, T. E.	4600 PARKDALE <i>One Whataburger Way</i>	CORPUS CHRISTI TX
P	TAFT, TIM	4600 PARKDALE <i>One Whataburger Way</i>	CORPUS CHRISTI TX 78411
✓	Beck, Wendy A	<i>One Whataburger Way</i>	Corpus Christi, TX 78411

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City	
		State	Zip Code
		FL	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent _____ **SIGNATURE REQUIRED** _____ Date _____
REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Wendy A Beck* **SIGNATURE REQUIRED** _____ Date *11/14/02* _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E040 (8/02)