2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000016443

Entity Name: SOUTH OBT CORP.

Current Principal Place of Business:

2002 PAPA JOHN'S BLVD. LOUISVILLE, KY 40299

Current Mailing Address:

2002 PAPA JOHN'S BLVD. LOUISVILLE, KY 40299

FEI Number: 59-3236496 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

FILED May 17, 2018

Secretary of State

CC0433474659

Officer/Director Detail:

Title DP Title TREASURER

Name O'HERN, TIMOTHY Name HOUSTON, CONNIE

Address 2002 PAPA JOHN'S BLVD Address 2002 PAPA JOHN'S BLVD.

City-State-Zip: LOUISVILLE KY 40299 City-State-Zip: LOUISVILLE KY 40299

Title S Title AS

Name PASSAFIUME, CLARA M Name COX, KENNETH M

Address 2002 PAPA JOHN'S BLVD. Address 2002 PAPA JOHN'S BLVD.

City-State-Zip: LOUISVILLE KY 40299 City-State-Zip: LOUISVILLE KY 40299

Title AT Title AS

Name PHENIX, CLAUDE M Name TATE, DEBRA A

Address 2002 PAPA JOHN'S BLVD. Address 2002 PAPA JOHN'S BLVD.

City-State-Zip: LOUISVILLE KY 40299 City-State-Zip: LOUISVILLE KY 40299

I hereby 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 all other like empowered.

SIGNATURE: DEBRA A. TATE ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

05/17/2018 Date