

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005115

Entity Name: PAPA JOHN'S USA, INC.

Current Principal Place of Business:

2002 PAPA JOHN'S BLVD
LOUISVILLE, KY 40299-2367

Current Mailing Address:

2002 PAPA JOHN'S BLVD
LOUISVILLE, KY 40299-2367

FEI Number: 61-1193912

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

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name SCHNATTER, JOHN H
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299-2367

Title DIRECTOR, COO
Name RITCHIE, STEVE M
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299-2367

Title DIRECTOR, CFO, TREASURER
Name TUCKER, LANCE F
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299-2367

Title AS
Name TATE, DEBRA A
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299-2367

Title S
Name PASSAFIUME, CLARA M
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299

Title ASST. TREASURER
Name PHENIX, CLAUDE
Address 2002 PAPA JOHN'S BLVD
City-State-Zip: LOUISVILLE KY 40299-2367

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 04/28/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date