## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 824387** 

Title:

Name:

Address:

City-St-Zip:

SECR

KATHRYN, ROOKES

ATLANTA, GA 30342

() Delete

200 GLENRIDGE POINT PARKWAY, SUITE 200

Entity Name: FRANCHISE STORES REALTY CORP.

FILED Apr 25, 2007 Secretary of State

Littly Nan	ie. PRANCHIC	E STORES REALTT CORF.					
Current Principal Place of Business:			New Principal Place of Business:				
200 GLENF SUITE 200 ATLANTA,	RIDGE POINT P GA 30342	ARKWAY					
Current Mailing Address:			New Mailing Address:				
200 GLENF SUITE 200 ATLANTA,	RIDGE POINT P GA 30342	ARKWAY					
FEI Number:	13-1700771	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) C	Certificate of Status E	Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
1201 HAYS	TION SERVICE STREET SEE, FL 32301						
The above in the State		bmits this statement for the pu	rpose of changing it	s registered offic	ce or registered ag	gent, or both,	
SIGNATUR	E:						
	Electronic	Signature of Registered Agen	t	Date			
Election Cam	paign Financing 1	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	ROMANIELLO, ST	POINT PARKWAY, SUITE 200	Title: Name: Address: City-St-Zip:	( ) CI	hange ( ) Addition		
Title: Name: Address: City-St-Zip:	TREA () C GILDAY, THOM 175 CAPITAL BO ROCKY HILL, CT	JLEVARD SUITE 400	Title: Name: Address: City-St-Zip:	TREA (X) C GILDAY, THOM 200 GLENRIDGE ATLANTA, GA 303			
Title: Name: Address: City-St-Zip:	NEAL, ARONSON	E STREET, NE SUITE 1825	Title: Name: Address: City-St-Zip:	DIR (X) C NEAL, ARONSON 200 GLENRIDGE ATLANTA, GA 303			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: THOM GILDAY T 04/25/2007

() Change () Addition