2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #834329

1. Entity Name WHATABURGER, INC.



Principal Place of Business Mailing Address

ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411

ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411

FILED May 03, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04292004 No Cha-P CR2E034 (10/03)

4. FEI Number 74-1693771

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET **SUITE 105**

TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE, Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOBSON, G. W. ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST MCLELLAN, J.M. ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DOBSON, T. E. ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BECK, WENDY A ONE WHATABURGER WAY CORPUS CHRISTI, TX 78411
TITLE NAME STREET ADDRESS CITY+ST-ZIP	

U00000152322 05/04/04-80082-005 150.00

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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 907, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attact that it is an address, with all other like empowered.

SIGNATURE: