FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 8:

1998

839685

(5)

CHICK-FIL-A, INC.

_	/lailing	Address

Principal Place of Business 5200 BUFFINGTON RD ATLANTA GA 30349-2998

5200 BUFFINGTON RD

FILED Feb 02 1998 8:00am Secretary of State



ATEANTA GA 30045-2350		ATERITA GR 30343-2330			DO NOT WRITE IN THIS SPACE						
						3. Date Incorporated	or Qualified				
						12/16/1977					
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number			Ar	plied For	
21		26	6			58-0941582				t Applicable	
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Statu			\$8.75	Additional	
22		27	7			5. Cermicate of State	is Desired		Fee Re	equired	
City & Stat	е	City & State			i	6. Election Campaig	n Financing		\$5.00	Mav Be	
23		28				Trust Fund Contrib	ution		Added 1		
Zip	Country	Zip	Cour	ntry		8. This corporation of	wes or has p			angible	
24	25	29	30			Personal Property] No	
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
CT	CORPORATION SYSTEM			81	Name						
1200 S. PINE ISLAND ROAD			ŀ	82	Street Address	ss (P.O. Box Number is	Not Accenta	hle)		-	
PLANTATION FL 33324				-	olicativadios (i.e. box Hainssi is, Not Nocopiasis)						
I BANAMON I E SSSET				83		,,,,,,					
			Ļ	_			· · · ·				
			İ	84	City			FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statul	tes, the ab	ove	-named corpor	ration submits this state	ment for the	purpose o	f changing it	s registered	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was rations of Section 607 0505. Fi	authorized lorida Stati	l by	the corporation	n's board of directors. I	hereby acce	ept the app	ointment as	registered	
•	and described and described and design	, add (15 o), 55 o(6.1.501.501.505)	v. loa olali								
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NOT	TE: Registered	Ager	nt signature required	when reinstaling)		DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANG	ES TO OFF	CERS AND	DIRECTOR	S IN 12	
TITLE	STD	☐ DELETE	1.1 TITI	LE					Change	Addition	
NAME	CATHY, JEANNETTE M		1,2 NA	1.2 NAME							
STREET ADDRESS				REET /	ADORESS		!				
CITY - ST - ZIP	ATT ALITA OL BORIS COOR			 Υ-ST	- ZIP						
TITLE	PD	☐ DELETE	2.1 TITI			····	 		Change	Addition	

NAME COLLINS, JAMES L 2.2 NAME 5200 BUFFINGTON RD STREET ADDRESS 2.3 STREET ADDRESS ATLANTA GA 30349-2998 CITY - ST - ZIP 2. 4 CITY - ST-ZIP TITLE DELETE 3.1 TITLE Change Addition CATHY, DAN T NAME 3.2 NAME 5200 BUFFINGTON RD 3 3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30349-2998 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TATLE CD 4.1 TITLE CATHY, S. TRUETT NAME 4. 2 NAME 5200 BUFFINGTON RD STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP atlanta ga 30349-2998 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

A RUET CATHU 114-98

(464) 765-800

2E034 (10/97)