FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **854249** **(0)**

1. Corporation Name

BURGER CHEF SYSTEMS, INC.

Principal Place of Business	Mailing Address
1233 HARDEE'S BOULEVARD PO BOX 1619 ROCKY MOUNT NC 27802-8619	1233 HARDEE'S BOULEVARD PO BOX 1619 ROCKY MOUNT NC 27802-8619

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

3. Date Incorporated or Qualified: 10/01/1982	3a. Date of Last Report: 01/30/1995
4. FEI Number: 56-0905056	Applied For / Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ______

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	☐ DELETE	1.1 TITLE	P ☐ Change ☒ Addition
NAME	GORDON, DAVID J.		1.2 NAME	H. Steve McManus
STREET ADDRESS	817 CASTAWAYS TRAIL		1.3 STREET ADDRESS	1601 Rivera Dr
CITY-ST-ZIP	ROCKY MT, NC 0		1.4 CITY-ST-ZIP	Rocky Mount, NC 27803
TITLE	V	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SPEED, JAMES H. JR.		2.2 NAME	
STREET ADDRESS	12613 SHALLOWFORD DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC		2.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HALL, RICHARD L		3.2 NAME	
STREET ADDRESS	125 STEEPLE CHASE ROAD		3.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKYMOUNT N		3.4 CITY-ST-ZIP	
TITLE	TD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	STRICKLAND, NANCY S		4.2 NAME	
STREET ADDRESS	104 CLAREMONT COURT		4.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKMOUNT N		4.4 CITY-ST-ZIP	
TITLE	VS	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CONDON, BREEN O		5.2 NAME	
STREET ADDRESS	3541 MANSFIELD DRIVE		5.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKY MOUNT,NC 00000		5.4 CITY-ST-ZIP	
TITLE	~~PO~~	☐ DELETE	6.1 TITLE	C ☒ Change ☐ Addition
NAME	AUTRY, ROBERT F.		6.2 NAME	Autry, Robert
STREET ADDRESS	103 WINDCHASE DRIVE		6.3 STREET ADDRESS	3201 Greystone Dr.
CITY-ST-ZIP	ROCKY MOUNT NC		6.4 CITY-ST-ZIP	Rocky Mount, NC 27804

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: James H. Speed, Jr. — James H. Speed, JR — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/26/96

Daytime Phone #: (919) 450-4627

CR2E034 (12/95)