

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90029 015 ***150.00

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1. Entity Name

THE RESTAURANT COMPANY OF MINNESOTA



Principal Place of Business

4917 EDEN AVE.
EDINA MN 55424-1341

Mailing Address

6075 POPLAR AVE., STE 800
MEMPHIS TN 38119

34020686



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 62-1831030

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCD	<input type="checkbox"/> Delete
NAME	SMITH, DONALD N	
STREET ADDRESS	6075 POPLAR AVE., STE 800	
CITY-ST-ZIP	MEMPHIS TN	
TITLE	VTD	<input checked="" type="checkbox"/> Delete
NAME	MCCORNAS, DON M	
STREET ADDRESS	6075 POPLAR AVE., STE 800	
CITY-ST-ZIP	MEMPHIS TN 38119	
TITLE	VPT	<input type="checkbox"/> Delete
NAME	DONAHOE, MICHAEL P	
STREET ADDRESS	6075 POPLAR AVE., STE 800	
CITY-ST-ZIP	MEMPHIS TN 38119	
TITLE	VPO	<input type="checkbox"/> Delete
NAME	FRANK, JON	
STREET ADDRESS	4917 EDEN AVE	
CITY-ST-ZIP	MINNEAPOLIS MN 55424	
TITLE	AS	<input type="checkbox"/> Delete
NAME	WHITNEY, ANDREW	
STREET ADDRESS	6075 POPLAR AVE., STE 800	
CITY-ST-ZIP	MEMPHIS TN 38119	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	JEHL, LOUIS C	
STREET ADDRESS	6075 POPLAR AVE., STE 800	
CITY-ST-ZIP	MEMPHIS TN	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VICE PRESIDENT
STREET ADDRESS	ROBERT J. WINTERS
CITY-ST-ZIP	6075 POPLAR AVE., STE 800 MEMPHIS, TN 38119

12. 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael Donahoe* MICHAEL DONAHOE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/04 901-766-6400

524025686

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