

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004992

FILED
Jan 12, 2009
Secretary of State

Entity Name: FOOD SERVICE FRANCHISE CORPORATION

Current Principal Place of Business:

1007 NORTH MAIN ST
COLUMBIA, IL 62236

New Principal Place of Business:

Current Mailing Address:

1007 NORTH MAIN ST
COLUMBIA, IL 62236

New Mailing Address:

FEI Number: 43-1749902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: TIMMONS, WILLIAM
Address: 1200 RUECK RD.
City-St-Zip: COLUMBIA, IL 62236

Title: D () Delete
Name: TIMMONS, CYNTHIA
Address: 1200 RUECK RD.
City-St-Zip: COLUMBIA, IL 62236

Title: DV () Delete
Name: TIMMONS, KRSTOPHER
Address: 447 TERRY DR.
City-St-Zip: COLUMBIA, IL 62236

Title: S () Delete
Name: KNIGHT, SAMUEL
Address: 2129 INGALLS CIRCLE
City-St-Zip: O'FALLON, MO 63368

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: TIMMONS, KRSTOPHER
Address: 447 TERRY DR.
City-St-Zip: COLUMBIA, IL 62236

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: SAMUEL KNIGHT

S

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date