

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002310

FILED
Apr 22, 2011
Secretary of State

Entity Name: FIRST FRANCHISE CAPITAL CORPORATION

Current Principal Place of Business:

ONE MAYNARD DRIVE
SUITE 2104
PARK RIDGE, NJ 07656

New Principal Place of Business:

Current Mailing Address:

ONE MAYNARD DRIVE
SUITE 2104
PARK RIDGE, NJ 07656

New Mailing Address:

FEI Number: 13-4189715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: HALL, J FRANKLIN
Address: 201 E 4TH ST, SUITE 1900
City-St-Zip: CINCINNATI, OH 45202

Title: P
Name: SCHULDT, THOMAS
Address: ONE MAYNARD DR, STE 2104
City-St-Zip: PARK RIDGE, NJ 07656

Title: DS
Name: GEHLMANN, GREGORY A
Address: 201 E 4TH ST, SUITE 1900
City-St-Zip: CINCINNATI, OH 45202

Title: DT
Name: STOLLINGS, ANTHONY M
Address: 201 E 4TH ST, SUITE 1900
City-St-Zip: CINCINNATI, OH 45202

Title: D
Name: LEFFERSON, C DOUGLAS
Address: 201 E 4TH ST, SUITE 1900
City-St-Zip: CINCINNATI, OH 45202

I hereby 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 all other like empowered.

SIGNATURE: GREGORY A. GEHLMANN

DS

04/22/2011

Electronic Signature of Signing Officer or Director

Date