

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005124

FILED  
Feb 28, 2008  
Secretary of State

Entity Name: FED USA FRANCHISING GROUP, INC.

## Current Principal Place of Business:

4450 SOJOURN DRIVE, SUITE 500  
ADDISON, TX 75001

## New Principal Place of Business:

## Current Mailing Address:

4450 SOJOURN DRIVE, SUITE 500  
ADDISON, TX 75001

## New Mailing Address:

FEI Number: 20-2985154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: CALLAHAN, KEVIN R  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

Title: EVPD ( ) Delete  
Name: PAPE, MARK E  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

Title: EVP ( ) Delete  
Name: MCPADDEN, M. SEAN  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

Title: VP ( ) Delete  
Name: HUFF, WILLIAM H  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

Title: SVP ( ) Delete  
Name: FISHER, JOSEPH G  
Address: 150 HARVESTER DRIVE, SUITE 300  
City-St-Zip: BURR RIDGE, IL 60527

Title: CAO ( ) Delete  
Name: VAUGHAN, V. VAN  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVPD (X) Change ( ) Addition  
Name: MCCLURE, MICHAEL J  
Address: 4450 SOJOURN DR., STE. 500  
City-St-Zip: ADDISON, TX 75001

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

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

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

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: M. SEAN MCPADDEN

EVPD

02/28/2008

Electronic Signature of Signing Officer or Director

Date