

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ANNUAL REPORT  
1995



Sandra B. Mooreman  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY - 1 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F92000000440 (9)

1. Corporation Name

BRINKER FROZEN BEVERAGE COMPANY

Principal Place of Business

6820 LBJ FREEWAY  
DALLAS TX 75240

Mailing Address

6820 LBJ FREEWAY  
DALLAS TX 75240

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/12/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

75-2444666

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA ST.  
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                 |                     |
|-----------------|---------------------|
| TITLE           | CDCO                |
| NAME            | BRINKER, NORMAN E   |
| STREET ADDRESS  | 6820 LBJ FREEWAY    |
| CITY - ST - ZIP | DALLAS TX           |
| TITLE           | POCO                |
| NAME            | MCDUGALL, RONALD A  |
| STREET ADDRESS  | 6820 LBJ FREEWAY    |
| CITY - ST - ZIP | DALLAS TX           |
| TITLE           | EVPD                |
| NAME            | FORD, CREED L III   |
| STREET ADDRESS  | FORD, CREED, L, III |
| CITY - ST - ZIP | DALLAS TX           |
| TITLE           | EVFT                |
| NAME            | SMITHART, DEBRA L   |
| STREET ADDRESS  | 6820 LBJ FREEWAY    |
| CITY - ST - ZIP | DALLAS TX           |
| TITLE           | VP                  |
| NAME            | OWENS, RUSSELL G    |
| STREET ADDRESS  | 6820 LBJ FREEWAY    |
| CITY - ST - ZIP | DALLAS TX 75240     |
| TITLE           | VP                  |
| NAME            | SONSTEBY CHARLES S. |
| STREET ADDRESS  | 6820 LBJ FREEWAY    |
| CITY - ST - ZIP | DALLAS TX 75240     |

|                     |                     |                                                                              |
|---------------------|---------------------|------------------------------------------------------------------------------|
| 1.1 TITLE           | VP/AS               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            | Jay Tobin           |                                                                              |
| 1.3 STREET ADDRESS  | 6820 LBJ Freeway    |                                                                              |
| 1.4 CITY - ST - ZIP | Dallas, Texas 75240 |                                                                              |
| 2.1 TITLE           | AS                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            | Barbara Mahoney     |                                                                              |
| 2.3 STREET ADDRESS  | 6820 LBJ Freeway    |                                                                              |
| 2.4 CITY - ST - ZIP | Dallas, Texas 75240 |                                                                              |
| 3.1 TITLE           | P/D                 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |                     |                                                                              |
| 3.3 STREET ADDRESS  |                     |                                                                              |
| 3.4 CITY - ST - ZIP |                     |                                                                              |
| 4.1 TITLE           | EVP/CF/D            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |                     |                                                                              |
| 4.3 STREET ADDRESS  |                     |                                                                              |
| 4.4 CITY - ST - ZIP |                     |                                                                              |
| 5.1 TITLE           | SEN. V.P.           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |                     |                                                                              |
| 5.3 STREET ADDRESS  |                     |                                                                              |
| 5.4 CITY - ST - ZIP |                     |                                                                              |
| 6.1 TITLE           |                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME            |                     |                                                                              |
| 6.3 STREET ADDRESS  |                     |                                                                              |
| 6.4 CITY - ST - ZIP |                     |                                                                              |

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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Charles M. Sonstebly 4/24/95 (214) 770-8824