


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2005 8:00 am
Secretary of State

07-28-2005 90006 004 ***150.00

DOCUMENT # F92000000510

1. Entity Name
AFC ENTERPRISES, INC.



Principal Place of Business
**SIX CONCOURSE PARKWAY
 SUITE 1700
 ATLANTA, GA 30328 US**

Mailing Address
**PO BOX 8H001
 SAN ANTONIO, TX 78201 US**

50058397



2. Principal Place of Business
5555 Glenridge Connector

3. Mailing Address
5555 Glenridge Connector

Suite, Apt. #, etc.
300

City & State
Atlanta GA

Zip
30342

06302005 Chg-P CR2E034 (10/03)

4. FEI Number
58-2016606

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

6. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CCEO BELATTI, FRANK J 330 CANNADY CT ATLANTA, GA 30338 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCOO HOLBROOK, DICK 4272 HIGHBORNE DR MARIETTA, GA 30066 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>President - Popeyes</i> <i>Kenneth L. Keyme</i> <i>5555 Glenridge Connector</i> <i>Atlanta, GA 30342</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HUNT, GARY A SIX CONCOURSE PKWY, STE 1700 ATLANTA, GA 30328 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>H. Mel Hope, III</i> <i>SR. VP. FINANCE</i> <i>5555 Glenridge Connector</i> <i>Atlanta, GA 30342</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO BEILSTEIN, FRED SIX CONCOURSE PKWY., STE. 1700 ATLANTA, GA 30320 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP TANENBAUM, ALLAN J SIX CONCOURSE PKWY, STE 1700 ATLANTA, GA 30328 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROTH, JOHN M SIX CONCOURSE PKWY, STE 1700 ATLANTA, GA 30328 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **Secty** *7-24-05* *770-353-3321*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #