

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000004797

1. Entity Name

THE CHEESECAKE FACTORY INCORPORATED

**FILED**  
**Jan 21, 2000 8:00 am**  
**Secretary of State**

01-21-2000 90091 007 \*\*\*150.00

Principal Place of Business

Mailing Address

26950 AGOURA RD  
~~SUITE 101~~  
CALABASA HILL CA 91301  
US

26950 AGOURA RD  
~~SUITE 101~~  
CALABASAS HILLS CA 91301-5335  
US

2. Principal Place of Business

26950 Agoura Road

Suite, Apt. #, etc.

3. Mailing Address

26950 Agoura Road

Suite, Apt. #, etc.

City & State

Calabasas Hills, CA

City & State

Calabasas Hills, CA

Zip

Country

91301 - U.S.

Zip

Country

91301 - U.S.

4. FEI Number

51-0340466

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC OVERTON, DAVID 26950 AGOURA RD CALABASAS CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD DEITCHLE, GERALD W 26950 AGOURA RD CALABASAS CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV CANDIOTY, LINDA 26950 AGORA RD CALABASAS CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, WAYNE 26950 AGOURA RD CALABAGA CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGORY, THOMAS L 26950 AGOURA RD CALABASAS CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRANSORF, JEROME I 26950 AGOURA RD CLABASAS HILLS CA 91301	<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Zurzolō, Debby R. 26950 Agoura Road Calabasas Hills, CA 91301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Deitchle, Gerald W. 26950 Agoura Road Calabasas Hills, CA 91301	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Gerald W. Deitchle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/00

Date

(818) 871-3000

Daytime Phone #

CR2E034 (9/99)