

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000001700 (2)

1. Corporation Name

ARBY'S RESTAURANT DEVELOPMENT CORPORATION

Principal Place of Business

1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

Mailing Address

1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

3. Date Incorporated or Qualified

04/07/1995

3a. Date of Last Report

4. FEI Number

65-0558050

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

10. Name and Address of New Registered Agent

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 first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PIERCE, DONALD L  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

TITLE V ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
BRIGGS, ROBERT E  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

TITLE V ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D'ANGELO, RICHARD  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

TITLE V ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
GIMSON, CURTIS S  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

TITLE AS ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
WADE, MARY C  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

TITLE AT ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
FISHER, IRENE B  
1000 CORPORATE DR.  
FT. LAUDERDALE FL 33334

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE P ☒ Change ☐ Addition

2 NAME  
3 STREET ADDRESS  
4 CITY - ST - ZIP  
Cohlan, John L.  
900 Third Avenue  
New York, NY 10022

2 TITLE V ☒ Change ☐ Addition

3 NAME  
4 STREET ADDRESS  
5 CITY - ST - ZIP  
Crowe, Robert J.  
900 Third Avenue  
New York, NY 10022

3 TITLE V & CFO ☒ Change ☐ Addition

4 NAME  
5 STREET ADDRESS  
6 CITY - ST - ZIP  
Dorff, David L.  
1000 Corporate Dr.  
Ft. Lauderdale, FL 33334

4 TITLE ☐ Change ☐ Addition

5 NAME  
6 STREET ADDRESS  
7 CITY - ST - ZIP  
Wade, Mary C.  
900 Third Avenue  
New York, NY 10022

5 TITLE AS ☒ Change ☐ Addition

6 NAME  
7 STREET ADDRESS  
8 CITY - ST - ZIP  
Shultz, Thomas E.  
900 Third Avenue  
New York, NY 10022

6 TITLE T ☒ Change ☐ Addition

7 NAME  
8 STREET ADDRESS  
9 CITY - ST - ZIP  
Shultz, Thomas E.  
900 Third Avenue  
New York, NY 10022

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 if changed, or on an attachment with an address.

SIGNATURE: Robert J. Crowe, Asst. VP-Taxes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96

Date

212-230-3115

Daytime Phone

CR2E034 (12/95)