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FILED

May 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F95000005659 (6)

1. Corporation Name  
FRENCH QUARTER COFFEE COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

ONE CORPORATE PLACE  
55 FERNCROFT ROAD  
DANVERS MA 01923

ONE CORPORATE PLACE  
55 FERNCROFT ROAD  
DANVERS MA 01923

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/20/1995

4. FEI Number

04-3282314

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 11% (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEOD  
BAUMHAUER, WILLIAM H  
ONE CORPORATE PLACE, 55 FERNCROFT ROAD  
DANVERS MA 01923

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MOORE, DONALD  
ONE CORPORATE PLACE, 55 FERNCROFT ROAD  
DANVERS MA

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPCT  
BENSON, EARL  
55 FERNCROFT RD.  
DANVERS MA 01923

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
GCSV  
REDEPENNING, CHARLES W  
ONE CORPORATE PLACE, 55 FERNCROFT ROAD  
DANVERS MA 01923

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
HULLEY, MICHAEL  
ONE CORPORATE PLACE, 55 FERNCROFT ROAD  
DANVERS MA

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
DIMILLO, ALBERT A JR.  
ONE CORPORATE PLACE, 55 FERNCROFT ROAD  
DANVERS MA 01923

☒ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☒ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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: *Donald P. Moore - Donald P. Moore* *Michael Benson*

CR2E034 (10/97)