

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F96000000042

FILED  
Oct 05, 2006  
Secretary of State

Entity Name: BARNHILL'S BUFFET OF TENNESSEE, INC.

## Current Principal Place of Business:

226 PALAFOX PL 5TH FLR  
PENSACOLA, FL 32502 US

## New Principal Place of Business:

1210 BRIARVILLE ROAD  
MADISON, TN 37115 US

## Current Mailing Address:

226 PALAFOX PL 5TH FLR  
PENSACOLA, FL 32502 US

## New Mailing Address:

1210 BRIARVILLE ROAD  
MADISON, TN 37115 US

FEI Number: 62-1498097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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: PETER SOUZA

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: LANGFORD, ROBERT  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: P ( ) Delete  
Name: BARBER, W C  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: COO ( ) Delete  
Name: SPECK, ROBERT A  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: S ( ) Delete  
Name: FREY, MARK A  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: D ( ) Delete  
Name: LANGFORD, ROBERT M  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: D ( ) Delete  
Name: BARBER, W C  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: LANGFORD, ROBERT M  
Address: 1210 BRIARVILLE ROAD  
City-St-Zip: MADISON, TN 37115

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK A. FREY

S

10/05/2006

Electronic Signature of Signing Officer or Director

Date