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FILED

May 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000003499 (8)

1. Corporation Name

ARAMARK DIVERSIFIED FACILITY SERVICES, INC.

Principal Place of Business

1101 MARKET STREET  
PHILADELPHIA PA 19107

Mailing Address

1101 MARKET STREET  
PHILADELPHIA PA 19107-2934



3. Date Incorporated or Qualified

07/10/1996

3a. Date of Last Report

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

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30

4. FEI Number

23-2832221

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

9. Name and Address of Current Registered Agent

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

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P  
LEE, JOE E  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

TITLE ☐ DELETE

NAME V  
WATERS, ALLAN I  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

TITLE ☐ DELETE

NAME V  
CRONK, G M  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

TITLE ☐ DELETE

NAME V  
O'HARA, MICHAEL  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

TITLE ☒ DELETE

NAME TD  
MAHONEY, MELVIN M  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

TITLE ☒ DELETE

NAME AT  
GRIFFITH, ALAN J  
STREET ADDRESS 1101 MARKET STREET  
CITY-ST-ZIP PHILADELPHIA PA 19107

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TID ☒ Change ☐ Addition

AUSTELL, BARBARA  
1101 MARKET STREET  
PHILADELPHIA, PA 19107

PID ☒ Change ☐ Addition

PID ☒ Change ☐ Addition  
WILLIAM  
1101 MARKET STREET  
PHILADELPHIA PA 19107

14. I do 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 in an attachment with an address.

SIGNATURE:

*[Signature]*

4/28/97

215-238-3162

CR2E034 (9/96)