## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 28, 2000 8:00 am Secretary of State DOCUMENT # F97000002234 ~ 1. Entity Name RTM DEVELOPMENT COMPANY 04-28-2000 90049 025 \*\*\*158.75 Principal Place of Business Mailing Address 1000 CORPORATE DR. 1000 CORPORATE DR. FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334-3655 บบบนบบนบ 2. Principal Place of Business 3. Mailing Address 5995 BARFIELD ROAD 5995 BARFIELD ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For ATLANTA, GA 65-0740780 <u>ATLANTA, GA</u> Not Applicable 30328 Country Country \$8.75 Additional 5. Certificate of Status Desired USÁ 30328 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition UMPHENOUR, RUSSELL V JR NAME NAME STREET ADDRESS 5995 BARFIELD RD STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30328 CITY-ST-ZIP SVD TITLE ☐ Delete TITLE ☐ Change ☐ Addition COOPER, DENNIE E NAME NAME 5995 BARFILED RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ALTANTA GA 30328** CITY-ST-ZIP SVSD TITLE ☐ Delete TITLE ☐ Change ☐ Addition WELCH, J R NAME STREET ADDRESS 5995 BARFIELD RD STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30328 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition BENHAM, DOUGLAS N NAME NAME STREET ADDRESS 5995 BARFIELD RD STREET ADDRESS JI Y - ST - ZIP ATLANTA GA 30328 CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition NAME BLL ADDRESS STREET ADDRESS FY ST-ZIP CITY-ST-ZIP LE ☐ Delete TITLE ☐ Change ☐ Addition

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.

STREET ADDRESS CITY-ST-ZIP

NAME

MANUATUDE

SIGNATURE AND TYPED OR PRINTED

APPL ADDRESS

ST ZIP

AME OF SIGNING OFFICER OF DIRECTOR

ECY 4/24/2000

(404)256-4900

Daytime Ph