2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

May 05, 2003 8:00 am § Secretary of State F99000001220 DOCUMENT # 05-05-2003 90250 023 ***150.00 1. Entity Name RTM SAVANNAH, INC. Principal Place of Business Mailing Address 5995 BARFIELD RD 5995 BARFIELD RD ATLANTA GA 30328 ATLANTA GA 30328 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 58-2192002 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Change ☐ Addition PD NAME UMPHENOUR, RUSSELL V JR NAME STREET ADDRESS STREET ADDRESS 5995 BARFIELD RD CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30328 TITLE ☐ Delete TITLE ☐ Change ☐ Addition TDV NAME BENHAM, DOUGLAS N STREET ADDRESS STREET ADDRESS 5995 BARFIELD RD CITY-ST-ZIP CITY-ST-ZIP <u>atlanta ga 30328</u> TITLE ☐ Delete TITLE Change ☐ Addition COBD NAME NAME COOPER, DENNIS E STREET ADDRESS STREET ADDRESS 5995 BARFIELD RD CITY-ST-ZIP CITY-ST-ZIP <u>atlanta ga 30328</u> TITLE TITLE ☐ Change ☐ Addition Delete ۷D NAME NAME WELCH, J. RUSSELL STREET ADDRESS STREET ADDRESS 5995 BARFIELD RD CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30328 TITLE ☐ Delete □ Change Addition NAME NAME BARTON, SHARRON L STREET ADDRESS STREET ADDRESS 5995 BARFIELD ROAD CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME GARRETT, THOMAS A STREET ADDRESS STREET ADDRESS 5995 BARFIELD RD

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like propowered.

CITY-ST-ZIP

SIGNATURE:

atlant<u>a g</u>a 30328

CITY-ST-ZIP

FILED

RTM Savannah, Inc.

Additional Officers:

Deborah K. Pike	٧
Ray Biondi	٧
John L. Gray, Jr.	٧
Devin L. Keil	٧
Patricia L. Reilly	٧
John N. Anderson	٧
Susan A. Bauer	٧
Daniel T. Collins	V
Gregory L. Hawkins	٧
Wendy G. Henderson	V
Allison K. Hyer	٧
Susan A. Masten	V
Jeryl M. McIntyre	V
Jack A. Odachowski	V
Karen G. Samples	V
Robert S. Stallings	V
Melissa M. Strait	٧
John A. Todd, Jr.	٧
Sharon S. Umphenour	V
David L. Early	٧
Patrick S. Herreman	٧
Michael P. Kovac	٧