2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G51373

POLKEY, KURT V

6225 ST.AUGUSTINE RD.

JACKSONVILLE, FL 32217

Name:

Address:

City-St-Zip:

Entity Name: YUM YUM TREE OF JACKSONVILLE, INC.

FILED Apr 21, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6225 ST.AUGUSTINE RD. JACKSONVILLE, FL 32217 **Current Mailing Address: New Mailing Address:** 6225 ST.AUGUSTINE RD. JACKSONVILLE, FL 32217 FEI Number: 59-2307236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HELLER, STEVEN R., ESQ. 525 NO. NEWNAN ST. JACKSONVILLE, FL 32202 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition POLKEY, TERESA L., Name: Name: 6225 ST.AUGUSTINE RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: Title: Title: () Delete () Change () Addition Name: POLKEY, JAMES M., Name: 6225 ST.AUGUSTINE RD. Address: Address: JACKSONVILLE, FL 32217 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MIKOVIC, STACIE Name: Name: 4342 WINDENBROOK COURT Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES M POLKEY S 04/21/2002