

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000005454

FILED  
Apr 19, 2002 8:00 AM  
Secretary of State

**Entity Name:** CNL RESTAURANT INVESTORS, LLC

**Current Principal Place of Business:**

450 SOUTH ORANGE AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4920  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 59-3650075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHAPIN, ROBERT W  
450 SOUTH ORANGE AVENUE  
ORLANDO, FL 32801

**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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: CNL RESTAURANT PROPE, RTY SERVICES, I NC.  
Address: 450 S. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: RTM ACQUISITION COMP, ANY, L.L.C.  
Address: 5995 BARFIELD ROAD N.E.  
City-St-Zip: ATLANTA, GA 30328

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CNL RP SERVICES, LLC,  
Address: 450 S. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RAYMON BYRON CARLOCK, JR.

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04/19/2002

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date