FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 PM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L55271 (5)

1. Corporate Name

MID-FLORIDA RESTAURANT OPERATORS, INC.

Principal Office Address

1000 MIAMI SRINGS DRIVE
LONGWOOD FL 32779
US

Mailing Address

30 SKYLINE DRIVE
LAKE MARY FL 32746
US

3. Date Incorporated/Qualified: 03/02/1990

3a. Date Last Report: 05/01/1994

2. Date Last Change — 21 — 22 — 23 — 24 — 25

2a Date Last Change — 26 — 27 — 28 — 29 — 30

4. FEI Number: 59-2994803 — 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. The corporation has stock, the aggregate number of shares issued and outstanding: Yes / No

9. Name and Address of Current Registered Agent

~~DAVIS DEBORAH R.~~
~~30 SKYLINE DRIVE~~
~~LAKE MARY FL 32746~~

Delete

10. Name and Address of New Registered Agent

81 Name: H Robert Dowd

82 Street Address (P.O. Box Number Not Acceptable): 30 Skyline Drive

83

84 City: Lake Mary FL 85 32746

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida and the street address of its registered office and the name of its registered agent are as shown below.

SIGNATURE: H Robert Dowd, Pres — 4-27-95

12. Officers and Directors

Title	~~PDS~~
Name	~~TOWNSEND, CLAY M.JR.~~
Street Address	~~30 SKYLINE DR.~~
City, State, Zip	~~LAKE MARY FL~~
Title	~~VD~~
Name	~~HOLT, BILL J.~~
Street Address	~~30 SKYLINE DR.~~
City, State, Zip	~~LAKE MARY FL~~
Title	~~T~~
Name	~~DAVIS, DEBORAH R.~~
Street Address	~~30 SKYLINE DR.~~
City, State, Zip	~~LAKE MARY FL~~
Title	President/Secretary
Name	H. Robert Dowd
Street Address	30 Skyline Dr
City, State, Zip	Lake Mary, Fl 32746

13. Additions and Changes to Officers and Directors

	Change	Addition
Delete	✓	
Delete	✓	
Delete	✓	
P/S H Robert Dowd 30 Skyline Drive Lake Mary, FL 32746		✓

14. I hereby certify that the information supplied with this report is complete, validated and accurate, and that I am a duly authorized officer or director of the corporation or other legal entity named herein. 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 and validity as if made under oath. I am aware that false information submitted in a report pursuant to Chapter 607, Florida Statutes, and that my signature appearing below or on the attached affidavit constitutes a false statement.

SIGNATURE: H Robert Dowd by PO — H Robert Dowd, Pres — 4/27/95 — 407-644-0240

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