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FILED  
Mar 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L81077 (4)

1. Corporation Name

WILT CHAMBERLAIN'S RESTAURANTS, INC.

Principal Place of Business

% CHARLES J. AVERBOOK  
7777 GLADES RD., SUITE 310  
BOCA RATON FL 33434-4195

Mailing Address

% CHARLES J. AVERBOOK  
7777 GLADES RD., SUITE 310  
BOCA RATON FL 33434-4195



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

06/18/1990

3a. Date of Last Report

02/21/1996

4. FEI Number

65-0205827

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

SCHMIER, ROBERT J.  
7777 GLADES RD.  
SUITE 310  
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC ☐ DELETE

NAME CHAMBERLAIN, WILT  
STREET ADDRESS 15216 ANTELO PLACE  
CITY-ST-ZIP BEL AIRE CA

TITLE T ☐ DELETE

NAME LOPEZ, KATHRYN A  
STREET ADDRESS 7777 GLADES RD., STE. 310  
CITY-ST-ZIP BOCA RATON FL

TITLE DVCS ☐ DELETE

NAME AVERBOOK, CHARLES J.  
STREET ADDRESS 7777 GLADES RD, STE 310  
CITY-ST-ZIP BOCA RATON FL

TITLE DP ☐ DELETE

NAME SCHMIER, ROBERT J.  
STREET ADDRESS 7777 GLADES RD, STE 310  
CITY-ST-ZIP BOCA RATON FL

TITLE D ☐ DELETE

NAME CHRISTOPHERSON, DONOVAN R.  
STREET ADDRESS 30 PONDVIEW LANE  
CITY-ST-ZIP STANFORD CT

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 or on an attachment with an address.

SIGNATURE: Robert J. Schmier, President

3/12/97 561 483-8400

CR2E034 (9/96)