

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 92166 049 \*\*\*150.00

**UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** M02000002287

**1. Entity Name**

FRANCHISE HOLDING V, LLC

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

4111 E. 37th St. North  
Suite, Apt. #, etc.

**3. Mailing Address**

4111 E. 37th St. North  
Suite, Apt. #, etc.

**DO NOT WRITE IN THIS SPACE**

**City & State**

Wichita, KS

**City & State**

Wichita, KS

**4. FEI Number**

N/A - Disregarded entity

**Applied For**

Not Applicable

**Zip**  
67220

**Country**  
USA

**Zip**  
67220

**Country**  
USA

**5. Certificate of Status Desired** ☐

**\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**

CT Corporation System

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

1200 South Pine Island Road

**City**

Plantation

**FL**

**Zip Code**

33324

**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**

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE**

**NAME**

**STREET ADDRESS**

**CITY - ST - ZIP**

Complete List Attached

**TITLE**

**NAME**

**STREET ADDRESS**

**CITY - ST - ZIP**

**TITLE**

**NAME**

**STREET ADDRESS**

**CITY - ST - ZIP**

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**DO NOT WRITE IN THIS SPACE**

**12. I 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 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Date**

**Daytime Phone #**

Attachment

03/31/2003

Annual Report Officer Template

30068702  
M02000002287

Franchise Holding V, LLC

<u>Officer</u>	<u>Title</u>
Steven John Feilmeier	President
Timothy J. Cesarek	Vice President
David Earl Dishman	Vice President
Scott R. Flucke	Secretary
Tye Gary Darland	Asst. Secretary
David Earl Dishman	Treasurer
Jill A. Bryant	Asst. Treasurer

Street Address

4111 E. 37th St. North  
Wichita, KS 67220