2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002798

Apr 03, 2009 Secretary of State

Entity Name: DUNKIN' DONUTS FRANCHISED RESTAURANTS LLC

Current Principal Place of Business: New Principal Place of Business: 130 ROYALL STREET CANTON, MA 02021 **Current Mailing Address: New Mailing Address:** 130 ROYALL STREET LEGAL DEPT. 3 EAST A CANTON, MA 02021 FEI Number: 20-4557548 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete LUTHER, JON L Name: Name: 130 ROYALL STREET Address: Address: City-St-Zip: CANTON, MA 02021 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition LAVELLE, KATE Name: LAVELLE, KATE S Name: Address: 130 ROYALL STREET Address: 130 ROYALL STREET City-St-Zip: CANTON, MA 02021 City-St-Zip: **CANTON, MA 02021** Title: MGR () Delete Title: () Change () Addition HORN, STEPHEN Name: Name: Address: 130 ROYALL STREET Address: City-St-Zip: CANTON, MA 02021 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: FIGUEROA, ORLANDO Name: Address: 48 WALL STREET, 27TH FLOOR Address: City-St-Zip: NEW YORK, NY 10005 City-St-Zip: Title: MGR () Delete Title: () Change () Addition ABEDINE, BENJAMIN B Name: Name: 48 WALL STREET, 27TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10005 City-St-Zip: Title: () Delete Title: () Change (X) Addition TRAVIS. NIGEL Name: Name: Address: Address: 130 ROYALL STREET CANTON, MA 02021 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEPHEN HORN MGR 04/03/2009