

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000100

Entity Name: RTM SAVANNAH, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1155 PERIMETER CENTER WEST
SUITE 1200
ATLANTA, GA 30338

New Principal Place of Business:

Current Mailing Address:

1155 PERIMETER CENTER WEST
SUITE 1200
ATLANTA, GA 30338

New Mailing Address:

FEI Number: 13-3760393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

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/MANAGERS:

Title: MGR (X) Delete
Name: BARTON, SHARRON L
Address: 1155 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338

Title: MGR () Delete
Name: HARE, STEPHEN E
Address: 1155 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338

Title: MGR () Delete
Name: OKESON, NILSHEN H
Address: 1155 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338

Title: MGR () Delete
Name: SMITH, ROLAND C
Address: 1155 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: OKESON, NILS H
Address: 1155 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338

Title: () Change () Addition
Name:
Address:
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: NILS H. OKESON

MGR

04/29/2009

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