

FILED
May 28, 2004 8:00 am
Secretary of State

05-10-2004 90459 049 ****61.25

**2004 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

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66424858



04212004 Chg-NP CR2E037 (10/03)

DOCUMENT # N03000000768 1. Entity Name TALLAHASSEE FLORIDA HOTTEST SUBS MARKETING COOPERATIVE, INC.					
Principal Place of Business 210 OFFICE PLAZA DR TALLAHASSEE, FL 32301			Mailing Address 210 OFFICE PLAZA DR TALLAHASSEE, FL 32301		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 02-0547764	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HOLMES, CHRIS 210 OFFICE PLAZA DR TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Sorensen, Robin Street Address (P.O. Box Number is Not Acceptable) 3410 Kori Rd City Jacksonville FL Zip Code 32257		
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 Robin Sorensen, D 4/28/04 Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00-May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete FABOZZI, RALPH 3017 GOLDEN EAGLE DR TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete HOLMES, CHRIS C/O CLH DEVELOPMENT, INC. 210 OFFICE PL DR TALLAHASSEE, FL 32301		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete HOLMES, MATT MJR HOLDINGS, INC 14213 TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			4/28/04 904 886 8300 Signature and typed or printed name of signing officer or director Date Daytime Phone #		