2002 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2002 8:00 am Secretary of State DOCUMENT # **N9600001720** 1. Entity Name 04-10-2002 90452 010 ****70.00 CHECKERS NATIONAL PRODUCTION FUND, INC. Principal Place of Business Mailing Address 4300 WEST CYPRESS STREET 4300 WEST CYPRESS STREET SUITE 600 SUITE 600 TAMPA FL 33607 TAMPA FL 33607 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-2051008 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Ø 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Delete TITLE ☐ Addition (9/01 Dinel J. Dorsch DORSCH, DANIEL NAME NAME 4300 W. Cypress St., #600 STREET ADDRESS STREET ADDRESS 14255 49TH ST., N., #1 Tampa, FL. 33607 CITY-ST-ZIP CiTY-ST-ZIP **CLEARWATER FL 33762** TITLE ☐ Delete TITLE Change ☐ Addition David G. Kochler 4300 W. Cypress St. #600 BECK, WENDY A NAME NAME STREET ADDRESS STREET ADDRESS 14225 49TH ST N, BLDG, #1 Tampa, FL 33607 CITY-ST-ZIP CLEARWATER FL 33762 CITY-ST-ZIP-Change TITLE ☐ Delete TITLE ☐ Addition Richard TURER 4300 W. Cypress St., #600 TURER, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 14225 49TH ST N., #1 CITY-ST-ZIP CITY-ST-ZIP Tampa, PC 33607 CLEARWATER FL 33762 ☐ Change TITLE Delete TITLE ▼ Addition Brian R. Doster NAME NAME 4300 W. Cypress St., #600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

of the corporation or the receiver or trustee empowered. changed, or on an attachment with an address, with all other like empowered. R Vice President; Corporate Counsel and Secretary

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

9/02