2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001725

FILED Apr 28, 2008 Secretary of State

Entity Name: CHECKERS ADVERTISING COOPERATIVE ASSOCIATION OF ATLANTA, INC.

Current Principal Place of Business:

4300 WEST CYPRESS STREET, SUITE 600 TAMPA, FL 33607

Current Mailing Address:

4300 WEST CYPRESS STREET, SUITE 600 TAMPA, FL 33607

FEI Number: 58-2048102

1201 HAYS STREET

TALLAHASSEE, FL 32301

CORPORATION SERVICE COMPANY

FEI Number Applied For ()

FEI Number Not Applicable ()

SUITE 731 TAMPA, FL 33609

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

US

CHECKERS 4300 CYPRESS

SUITE 600

TAMPA, FL 33607 US

New Mailing Address:

5401 W. KENNEDY BLVD.

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: JIM NELLIS

04/28/2008 Date

Name and Address of New Registered Agent:

New Principal Place of Business:

Electronic Signature of Registered Agent **OFFICERS AND DIRECTORS:**

() Delete

HORNSTEINER, MICHAEL Name: 870 F ATLANTIC CT STE 247 Address: City-St-Zip: ROSWELL, GA 30075

Title: VPD () Delete Name: FORD, LARRY

Address: 314 EMERALD PKWY City-St-Zip: CHATSWORTH, GA 30705

Title: (X) Delete BARKER, DWIGHT Name:

1151 BELLGRAVE BEND S.W. Address: City-St-Zip: SNELLVILLE, GA 30078

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition FORD, LARRY Name:

Address: 1111 S. THORNTON AVE

City-St-Zip: DALTON, GA 30720

Title: (X) Change () Addition

Name: STRICKLAND, JOHN Address: 130 HIGHLAND PT. City-St-Zip: NEWNAN, GA 30265

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY FORD Ρ 04/28/2008