2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005999

Address:

City-St-Zip:

5133 SAN JOSE ST.

TAMPA, FL 33629

Entity Name: BURGER KING/MCLAMORE FOUNDATION, INC.

FILED Mar 19, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
9300 SOUTH DADELAND BOULEVARD MIAMI, FL 33156 US				9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 US			
Current Mailing Address:				New Mailing Address:			
9300 SOUTH DADELAND BOULEVARD MIAMI, FL 33156 US				9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 US			
FEI Number:	65-0779225	FEI Number Applied Fo	or() FEI Nui	mber Not App	licable ()	Certificate of Status Desi	red()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BALLTRIP, STEVE 9300 SOUTH DADELAND BOULEVARD MIAMI, FL 33156 US				BALLTRIP, STEVE 9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 US			
The above in the State	named entit e of Florida.	ry submits this statement	for the purpose of	of changing i	ts registere	ed office or registered agen	t, or both,
SIGNATURE:				03/19/2004			
	Electr	onic Signature of Regist	ered Agent			Date	_
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	LEWIS, STE 1780 SWED			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CERRONE,	LAGOON DRIVE, 7TH FLOOR		Title: Name: Address: City-St-Zip:	CCD ELLIS, MIC 5505 BLUE MIAMI, FL	LAGOON DRIVE, 7TH FLOOR	
Title: Name: Address: City-St-Zip:	BALLTRIP, S 2380 NEW C			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:		() Delete . S. WHITMAN		Title: Name:	SD MCLAMOR	(X) Change ()Addition E. S. WHITMAN	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

5133 SAN JOSE ST.

TAMPA, FL 33629

SIGNATURE: STEVEN M. LEWIS CC 03/19/2004