2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005999

FILED Mar 05, 2007 Secretary of State

Entity Name: BURGER KING/MCLAMORE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 **New Mailing Address: Current Mailing Address:** 9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 US FEI Number: 65-0779225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEWIS, STEVEN M 9300 SOUTH DADELAND BOULEVARD 1ST FLOOR MIAMI, FL 33156 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CCD () Change () Addition () Delete LEWIS, STEVEN M Name: Name: 1780 SWEDE ROAD Address: Address: City-St-Zip: BLUE BELL, PA 19422 US City-St-Zip: Title: CCD () Delete Title: () Change () Addition Name: RUCKER, CLYDE W Name: Address: 5505 BLUE LAGOON DRIVE. 6TH FLOOR Address: City-St-Zip: MIAMI, FL 33126 US City-St-Zip: Title: () Delete Title: (X) Change () Addition RUCKER, CLYDE W Name: PATTERSON, WILLIAM (JR.) Name: 5505 BLUE LAGOON DRIVE, 6TH FLOOR Address: Address: 1250 TOWER LANE City-St-Zip: MIAMI, FL 33126 US City-St-Zip: ERIE, PA 16505 US () Delete Title: SD Title: () Change () Addition MCLAMORE, S. WHITMAN Name: Name: Address: 114 WAREHAM'S POINT Address: City-St-Zip: WILLIAMSBURG, VA 23185 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CLYDE RUCKER CCD 03/05/2007