2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000005999

Entity Name: BURGER KING/MCLAMORE FOUNDATION, INC.

FILED Jan 10, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17777 OLD CUTLER ROAD 9300 SOUTH DADELAND BOULEVARD

MIAMI, FL 33157 MIAMI, FL 33156 US

Current Mailing Address: New Mailing Address:

17777 OLD CUTLER ROAD 9300 SOUTH DADELAND BOULEVARD

MIAMI, FL 33157 MIAMI, FL 33156 US

FEI Number: 65-0779225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BALLTRIP, STEVE
17777 OLD CUTLER ROAD
BALLTRIP, STEVE
9300 SOUTH DADELAND BOULEVARD

MIAMI, FL 33157 US 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: 01/10/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

 Name:
 LEWIS, STEVEN M
 Name:
 LEWIS, STEVEN M

 Address:
 1780 SWEDE ROAD
 Address:
 1780 SWEDE ROAD

 City-St-Zip:
 BLUE BELL, PA 19422
 City-St-Zip:
 BLUE BELL, PA 19422 US

Title: CD () Delete Title: CD (X) Change () Addition

Name: CLOUSER, CHRIS Name: CLOUSER, CHRIS

Address: 17777 OLD CUTLER RD 3 NORTH Address: 9300 SOUTH DADELAND BOULEVARD

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33156 US

 Name:
 BALLTRIP, STEVE
 Name:
 BALLTRIP, STEVE

 Address:
 2380 NEW CUT CIR
 Address:
 2380 NEW CUT CIR

City-St-Zip: SPARTANBURG, SC 29303 City-St-Zip: SPARTANBURG, SC 29303 US

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.

SIGNATURE: STEVE BALLTRIP TD 01/10/2003