

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006031

FILED
Jan 27, 2009
Secretary of State

Entity Name: DENNY'S FRANCHISEE ASSOCIATION, INC.

Current Principal Place of Business:

2126 WEST INDIAN SCHOOL RD.
PHOENIZ, AZ 85015

New Principal Place of Business:

Current Mailing Address:

2126 WEST INDIAN SCHOOL RD.
PHOENIZ, AZ 85015

New Mailing Address:

FEI Number: 86-0894161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZARCO AND PARDO, P.A.
BANK OF AMERICA TOWER
100 S.E. 2ND STREET STE. 2700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: BAGNAS, BENJAMIN
Address: 8020 ENTRADA DE LUZ WEST
City-St-Zip: SAN DIEGO, CA 92127

Title: D () Delete
Name: BEATTIE, GLEN A
Address: P.O. BOX 11316
City-St-Zip: CHANDLER, AZ 85248

Title: T () Delete
Name: LAFREEDA, DAWN
Address: 5839 SEBASTIAN PL, SUITE 102
City-St-Zip: SAN ANTONIO, TX 78249

Title: D () Delete
Name: ROMANDETTI, JOHN
Address: 382 HARBOR COURT
City-St-Zip: WESTON, FL 33326

Title: P () Delete
Name: BARBER, CRAIG
Address: 1210 BRIAVILLE RD
City-St-Zip: MADISON, TN 37115

Title: D () Delete
Name: FERLAND, CARL
Address: 1071 PEMBERTON HILL RD.
City-St-Zip: APEX, NC 27502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: COX, WILLIAM
Address: 825 S. 48TH ST
City-St-Zip: TEMPE, AZ 85281

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT DUSKIN

D

01/27/2009

Electronic Signature of Signing Officer or Director

Date