2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000030921

KIRTS, NANCY

10106 OWL HEAD CIR

PORT CHARLOTTE, FL 33981

Name:

Address: City-St-Zip:

Entity Name: OBEE'S FRANCHISE SYSTEMS, INC.

FILED Jun 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1777 TAMIAMI TR STE 206 PORT CHARLOTTE, FL 33948 **Current Mailing Address: New Mailing Address:** 1777 TAMIAMI TR STE 206 PORT CHARLOTTE, FL 33948 FEI Number: 65-0995037 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: PATRICK, JAMES E 15508 RÚSTON CIR PORT CHARLOTTE, FL 48891 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PATRICK, JAMES Name: Name: 15508 RUSHTON CIR Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33981 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition KEARNEY, THERON V Name: Name: 2132 CHARLOTTE AMALIE CT Address: Address: PUNTA GORDA, FL 33951 City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition MALON, HENRY C Name: Name: 44 WALL ST Address: Address: City-St-Zip: NEW YORK, NY 10005 City-St-Zip: Title: () Delete Title: () Change () Addition TITUS, NANCY S Name: Name: Address: 14578 RIVER BEACH DR Address: City-St-Zip: PORT CHARLOTTE, FL 33951 City-St-Zip: Title: ΑW (X) Delete Title: () Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES E PATRICK PRES 06/03/2004