

5.19.98 B 7641 c  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P00216 (2)  
1. Corporation Name  
MIDFLORIDA RESTAURANTS CORPORATION

Principal Place of Business <del>5501 ANDREWS RD. MOB 100000</del> <del>P O BOX 100000</del> <del>MOBILE AL 36608</del>	Mailing Address <del>5501 ANDREWS RD. MOB 100000</del> <del>P O BOX 100000</del> <del>MOBILE AL 36608</del>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3600 Springhill Business Park Suite 200 Mobile, AL 36608		2a. Mailing Address 26 3600 Springhill Business Park Suite 200 Mobile, AL 36608		3. Date Incorporated or Qualified 12/09/1983	
22 Zip 25 Country		28 Zip 30 Country		4. FEI Number 63-0864092	
23		29		Applied For Not Applicable	
24		30		Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	V	<input type="checkbox"/> DELETE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	CHADICK, EUGENE L., JR			3600 Springhill Business Park			
STREET ADDRESS	<del>5501 ANDREW RD.</del>			Suite 200			
CITY-ST-ZIP	<del>MOBILE AL</del>			Mobile, AL 36608			
TITLE	CD	<input type="checkbox"/> DELETE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	EVANS, MURRY J.			3600 Springhill Business Park			
STREET ADDRESS	<del>5501 ANDREW RD.</del>			Suite 200			
CITY-ST-ZIP	<del>MOBILE AL</del>			Mobile, AL 36608			
TITLE	<del>AS</del>	<input checked="" type="checkbox"/> DELETE		2.4 CITY-ST-ZIP			
NAME	<del>GRIZZLE, REBECCA</del>			3.1 TITLE			
STREET ADDRESS	<del>5501 ANDREWS RD.</del>			3.2 NAME			
CITY-ST-ZIP	<del>MOBILE AL</del>			3.3 STREET ADDRESS			
TITLE	VP	<input type="checkbox"/> DELETE		3.4 CITY-ST-ZIP			
NAME	HARTMAN, JAMES W III			4.1 TITLE			
STREET ADDRESS	<del>5501 ANDREWS RD.</del>			4. 3600 Springhill Business Park			
CITY-ST-ZIP	<del>MOBILE AL 36608</del>			Suite 200			
TITLE	P	<input type="checkbox"/> DELETE		4.3 Mobile, AL 36608			
NAME	BURKE, TED			4.4 CITY-ST-ZIP			
STREET ADDRESS	<del>5501 ANDREWS RD.</del>			5.1 TITLE			
CITY-ST-ZIP	<del>MOBILE FL 36608</del>			5.2 N 3600 Springhill Business Park			
TITLE		<input type="checkbox"/> DELETE		5.3 S Suite 200			
NAME				5.4 CITY-ST-ZIP Mobile, AL 36608			
STREET ADDRESS				6.1 TITLE			
CITY-ST-ZIP				6.2 NAME			
				6.3 STREET ADDRESS			
				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*James W. Hartman, III*

James W. Hartman, III

6.27.98 (211)345 3300

CR2E034 (10/97)