FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) (AMENDED)

FILED
02 DEC -9 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000015571

1. Entity Name
COUNTRY KITCHEN FAMILY RESTAURANT, INC.

DO NOT WRITE IN THIS SPACE

12/09/02--01099--002 **113.75
400009575284
12/09/02--01099--002 **113.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 741 NORTH US 1
Suite, Apt. #, etc.
City & State: OAK HILL, FLORIDA
Zip: 32759 Country: VOLUSIA

3. Mailing Address: SAME
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number: 59-3694901 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name: VICKIE K. SNIDER 500009402595
Street Address (P.O. Box Number is Not Acceptable)
12/09/02--01099--002 **113.75
741 NORTH US 1
City: OAK HILL, FL Zip Code: 32759

8. 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 .... DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRES.
NAME	VICKIE K. SNIDER
STREET ADDRESS	741 NORTH US 1
CITY-ST-ZIP	OAK HILL FL 32759
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
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CITY-ST-ZIP	

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CR2E034E (12/01)

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: X Vickie K Snider VICKIE K. SNIDER, PRES. 12/3/02 386-345-2666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #