## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04100

2585 W 5005

BERNE, IN 46711

Address:

City-St-Zip:

Entity Name: RICHARDS RESTAURANTS INC.

FILED Jan 30, 2006 Secretary of State

y		3011201713117111701170.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8341 N 400 BRYANT,		JS			
Current Mailing Address:			New Mailing Address:		
8341 N 400 BRYANT,		JS			
FEI Number:	: 35-1143023	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1010 NOŔ	DONALD C. TH HICKMAN Y, FL 33868	ROAD US	STRONG, DONALD C. 0 LAKE ANNIE WINTER HAVEN, FL 3		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				01/30/2006	
	Electron	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( STRONG, DON 419 W. MARKE BLUFFTON, IN	ET ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD ( MILHOLLAND, 1144 WILDWO BLUFFTON, IN	OOD LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ST ( STRONG, MON 419 WEST MA BLUFFTON, IN	RKET STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	TD ( YODER, DEED	) Delete A	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MONA JEAN STRONG ST 01/30/2006