FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P24571** **(2)**

1. Corporation Name
GRADY'S GOOD TIMES GOOD FOOD & DRINK, INC.

Principal Place of Business	Mailing Address
6820 LBJ FREEWAY DALLAS TX 75240 US	6820 LBJ FREEWAY DALLAS TX 75240 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **05/31/1989**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business 21:
2a. Mailing Address 26:
4. FEI Number: **62-1138929** ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22:
Suite, Apt. #, etc. 27:
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
City & State 23:
City & State 28:
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip 24: Country 25:
Zip 29: Country 30:
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	AT	1.1 TITLE		☐ Change ☐ Addition
NAME	SONSTEBY, CHARLES M.	1.2 NAME		
STREET ADDRESS	6820 LBJ FRWY	1.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX	1.4 CITY-ST-ZIP		
TITLE	SD	2.1 TITLE	EXEC V. P/ SECR.	☒ Change ☐ Addition
NAME	CALLAWAY, ROBERT L.	2.2 NAME	Roger F. Thomson	
STREET ADDRESS	6820 LBJ FRWY	2.3 STREET ADDRESS	6820 LBJ Freeway	
CITY-ST-ZIP	DALLAS TX	2.4 CITY-ST-ZIP	Dallas, Texas 75240	
TITLE	DCOC	3.1 TITLE		☐ Change ☐ Addition
NAME	REGAS, WILLIAM F.	3.2 NAME		
STREET ADDRESS	6739 KINGSTON PIKE	3.3 STREET ADDRESS		
CITY-ST-ZIP	KNOXVILLE TN	3.4 CITY-ST-ZIP		
TITLE	DCEO	4.1 TITLE		☐ Change ☐ Addition
NAME	BRINKER, NORMAN E.	4.2 NAME		
STREET ADDRESS	6820 LBJ FRWY	4.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX	4.4 CITY-ST-ZIP		
TITLE	VCFO	5.1 TITLE	EXEC V. P/ CFO	☒ Change ☐ Addition
NAME	SMITHART, DEBRA	5.2 NAME		
STREET ADDRESS	6820 LBJ FRWY	5.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX	5.4 CITY-ST-ZIP		
TITLE	PCOO	6.1 TITLE		☐ Change ☐ Addition
NAME	MCDOUGALL, RONALD A	6.2 NAME		
STREET ADDRESS	6820 LBJ FRWY	6.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: Charles M. Sonsteby Charles M. Sonsteby 4/26/95 (214) 770-8824
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0472484 FP