

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P28494** (3)

1. Corporation Name

DENNY'S REALTY, INC.



Principal Place of Business

Mailing Address

**203 E. MAIN STREET
P.O. BOX 3800
SPARTANBURG SC 29304**

**203 E. MAIN STREET
P.O. BOX 3800
SPARTANBURG SC 29304**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/13/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

93-1018443

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 PINE ISLAND ROAD
PLANTATION FL 33324**

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

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D**
MAW, SAMUEL H.
STREET ADDRESS **203 E. MAIN STREET**
CITY-ST-ZIP **SPARTANBURG SC**

TITLE ☐ DELETE

NAME **P**
BIGGS, A. RAY
STREET ADDRESS **203 E. MAIN ST**
CITY-ST-ZIP **SPARTANBURG SC**

TITLE ☐ DELETE

NAME **VP**
SMITH, JAMES GAYLON
STREET ADDRESS **203 E. MAIN STREET**
CITY-ST-ZIP **SPARTANBURG SC**

TITLE ☐ DELETE

NAME **AGCS**
TEWKESBURY, ALAN M.
STREET ADDRESS **203 E. MAIN ST**
CITY-ST-ZIP **LOS ANGELES CA**

TITLE ☐ DELETE

NAME **VPTS**
DUREN, C. BURN
STREET ADDRESS **203 EAST MAIN ST**
CITY-ST-ZIP **SPARTANBURG SC**

TITLE ☐ DELETE

NAME **VPG**
PARISH, RHONDA J.
STREET ADDRESS **203 E. MAIN STREET**
CITY-ST-ZIP **SPARTANBURG SC**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **Kent M. Smith**

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **C. Robert Campbell**

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **AS**
ROSS B. Nell

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME **Ronald B. Hutchison**

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ross B. Nell

Asst. Secretary

4/22/96 864-5978000

Date

Telephone

CR2E034 (12/95)