

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 21, 2001 8:00 am**  
**Secretary of State**

02-21-2001 90062 025 \*\*\*150.00

**DOCUMENT # P32546**

1. Entity Name  
**FAZOLI'S RESTAURANTS, INC.**

Principal Place of Business      Mailing Address

**2470 PALUMBO DRIVE**      **2470 PALUMBO DRIVE**  
**LEXINGTON KY 40509-1117**      **LEXINGTON KY 40509-1117**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **61-1180070**      Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>LALLY, THOMAS P</b> <b>2470 PALUMBO DRIVE</b> <b>LEXINGTON KY</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, COO</b> <b>Wayne M. Albritton</b> <b>2470 Palumbo Drive</b> <b>Lexington, KY 40509</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD</b> <b>SMITH, DAVID</b> <b>2470 PALUMBO DRIVE</b> <b>LEXINGTON KY</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, CPO</b> <b>Rebecca Fine</b> <b>2470 Palumbo Drive</b> <b>Lexington, KY 40509</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>TOYODA, KUNI</b> <b>2470 PALUMBO DRIVE</b> <b>LEXINGTON KY</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, CFO GCS</b> <b>Laurel Garrett</b> <b>2470 Palumbo Drive</b> <b>Lexington, KY 40509</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>MOSSER, LORI</b> <b>2470 PALUMBO DRIVE</b> <b>LEXINGTON KY</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, Franchise DR</b> <b>Sam P. Nelson</b> <b>2470 Palumbo Drive</b> <b>Lexington, KY 40509</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Secretary</b> <b>M. Elizabeth Moore</b> <b>2470 Palumbo Drive, Lexington, KY 40509</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, AQA</b> <b>Charles Lousignont</b> <b>2470 Palumbo Drive, Lexington, KY 40509</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>XXXXXXXX</b> <b>XAddition</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President, Training</b> <b>Kathryn Watkins</b> <b>2470 Palumbo Drive</b> <b>Lexington, KY 40509</b>

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 Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *David Smith*      **David Smith, CFO**      **02/13/2001**      **(859)268-1668 277**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)