

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90048 028 ***150.00

DOCUMENT # P35241

1. Corporation Name

KENTUCKY FRIED CHICKEN OF CALIFORNIA, INC.

Principal Place of Business

1441 GARDINER LANE
LOUISVILLE KY 40213

Mailing Address

1441 GARDINER LANE
LOUISVILLE KY 40213

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/26/1991

4. FEI Number

95-3674560

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 owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MODY, JEFFREY A
STREET ADDRESS 1441 GARDNER LANE
CITY-ST-ZIP LOUISVILLE KY ☐ DELETE

TITLE SD
NAME TOOP, R. SCOTT
STREET ADDRESS 1441 GARDINER LANE
CITY-ST-ZIP LOUISVILLE KY ☒ DELETE

TITLE T
NAME CORSI, KATHLEEN
STREET ADDRESS 1441 GARDINER LANE
CITY-ST-ZIP LOUISVILLE KY ☐ DELETE

TITLE V
NAME BLAIR, TOM G
STREET ADDRESS 1441 GARDINER LANE
CITY-ST-ZIP LOUISVILLE KY ☐ DELETE

TITLE AT
NAME MEDLEY, DEBBIE
STREET ADDRESS 1441 GARDINER LANE
CITY-ST-ZIP LOUISVILLE KY ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME Charles E. Rawley
1.3 STREET ADDRESS 1441 Gardiner Lane
1.4 CITY-ST-ZIP Louisville KY 40213 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE VSD
4.2 NAME R. Scott Toop
4.3 STREET ADDRESS 1441 Gardiner Lane
4.4 CITY-ST-ZIP Louisville KY 40213 ☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

Debbie Medley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99

Date

502-874-8669

Daytime Phone #

CR2E034 (1/98)

0524066