## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## DOCUMENT # P37177

1. Entity Name

FILED

Aug 02, 2004 8:00 am Secretary of State

08-02-2004 90019 016 \*\*\*550.00 KENNER KENTUCKY FRIED CHICKEN, INC. Principal Place of Business Mailing Address 94 NW READY AVE 94 NW READY AVE SUITE B-1 SUITE B-1 FT WALTON BEACH FL 32548 FT WALTON BEACH FL 32548 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (4/04) MOORE City & State City & State 4. FEI Number Applied For 72-0895373 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PANKRATZ, JOHN 500 MARY ESTHER CUT OFF Street Address (P.O. Box Number is Not Acceptable) FORT WALTON BEACH FL 32548 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing **\$5.00** May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PSCD** Delete TITLE ☐ Change ☐ Addition NAME PANKRATZ, MARILYNN NAME STREET ADDRESS 9 IMPERIAL'WOODS DRIVE STREET ADDRESS HARAHAN LA 70123 CITY-ST-ZIP CITY-ST-ZIP TITLE TD Delete TITLE Change □ Addition LINDSEY, GAIL NAME MALA STREET ADDRESS 9 IMPERIAL WOODS DRIVE STREET ADDRESS CITY-ST-ZIP HARAHAN LA 70123 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition PANKRATZ, JOHN NAME STREET ADDRESS STREET ADDRESS 94 NW READY AVE STE STE B-1 CITY-ST-ZIP FORT WALTON BEACH FL 32548 CITY-ST-ZIP TITLE □ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 redeliver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: