

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000044339 (6)

1. Corporation Name

HANOVER RESTAURANTS, INC.



Principal Place of Business

Mailing Address

6355 METRO W BLVD  
SUITE 445  
ORLANDO FL 32835

~~6355 METRO W BLVD~~  
~~SUITE 445~~  
~~ORLANDO FL 32835~~

3. Date Incorporated or Qualified

06/08/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 200 S. Orange Ave.

4. FEI Number

59-3318723

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 2300

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

City & State

City & State

23 Orlando, FL

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

Zip

Country

Zip

Country

24 25 29 32801-3432 30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~THE PRENTICE-HALL CORPORATION SYSTEM, INC.~~  
~~1201 HAVEN ST~~  
~~SUITE 405~~  
~~TALLAHASSEE FL 32301~~

81 Name

A.G.C. Co.

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

200 S. Orange Ave.

83

Suite 2300

84 City

Orlando

FL

85 Zip Code

32801-3432

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

By:

G. Thomas Ball, Vice President

4-24-96

Signature, by or for the corporation, of the registered agent required when reinstating.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME SILVERTON, VIVIANNE  
STREET ADDRESS 6355 METRO W BLVD SUITE 445  
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ DELETE  
NAME SILVERTON, TOBY  
STREET ADDRESS 6355 METRO W BLVD SUITE 445  
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ DELETE  
NAME VOSS, JEFF  
STREET ADDRESS 6355 METRO W BLVD SUITE 445  
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ DELETE  
NAME THAKKAR, RASSESH  
STREET ADDRESS 6355 METRO W BLVD SUITE 445  
CITY-ST-ZIP ORLANDO FL 32835

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change: ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE V/D ☒ Change: ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE T/S/D ☒ Change: ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE P/D ☒ Change: ☐ Addition  
4.2 NAME Thakkar, Rasesh  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

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

6.1 TITLE  
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:

Jeff Voss

3/12/96

407-826-5432

CR2E034 (12/95)