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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000071669 (2)

CALICO JACK'S RESTAURANTS, INC.

Principal Place of Business
2699 LEE ROAD, SUITE 200

Mailing Address

2699 LEE ROAD, SUITE 200 WINTER PARK FL 32789-1773

## FILED Apr 25 1997 8:00am Secretary of State



WINTER PARK	FL 32789	WINTER PARK FL 32789-1773						
					3. Date incorporated or Qualified 09/14/1995	3a. Date	of Last R	leport
	lace of Business	2a. Mailing Address		••••	4. FEI Number			pplied For
21		26			59-3334678		No.	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State	6	City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for i	ntangible ta	k under s	. 199.032,
24	25	29	30			Yes 🔲		
<del> </del>	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Ag	Birt	
ABR	ams, lehn e		8	1 Name				
801	N. MAGNOLIA AVE., STE. 201		8	2 Street	Address (P.O. Box Number is Not Acceptab	ie)		
ORL	ANDO FL 32789		Ļ					
			8	3				
			6	4 City	The state of the s		85 Zip	Code
					<u> </u>	FL		<u> </u>
SIGNATURE					corporation submite this state then for the poration's board of directors. I hereby acceptions are the submitted that the submi	ot the appoir	Traent as	registered
	Signature, typical or printed name of registered a			gent signatur	s required when reinstating)	DATE	EFOTO	20 11 40
12.	T	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC		Change	Addition
TIPLE	DONLEY, RON	Man percir	1.1 TITLE 1.2 NAM		Stine, Jeffrey 1. 2699 Lee Load, Suite Winter Park, FL 3		1 Orientão	Z_3 Addition
NAME					2100 1 ep Load, Suite	200		
STREET ADDRESS	2699 LEE ROAD, SUITE 200 WINTER PARK FL 32789			ET ADDRESS	Winter Park FL 3	2789		
CITY-ST-24F Title	WINIER FARA PL 32/09	☐ DELETE	1.4 CITY 2.1 TITLE		C/7	n n	Change	Addition
NAME			2.2 NAM		Timmerman feter 2699 Lee Ruad, Suite	ميا	· Driedings	
STREET ADDRESS				ET ADDRESS	1699 Lee Ruad, Suite	e zoo		
CITY-ST-ZIP			2.4 CITY		Winter Park, FL 32	789		
1011.5		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAM	E				
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY- ST- ZiP			3.4. CITY	-\$1-2IP				
TITLE		DELETE	4.1 TITLE			L	Change	Addition
N4ME			4. 2 NAM	Æ				
STREET ADDRESS			4.3 STRE	et address	1			
City-St-7iP			4.4 CITY	-ST-ZIP				
THILE		☐ DELETE	5.1 TITLI				] Change	Addition
NAME			5.2 NAM	Ε				
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY - ST - ZIP			5.4 CITY			<del></del>	7.5	<b>—</b>
TITLE		☐ DELETE	61 TITLI			L.	Change	Addition
NAME			6.2 NAM		Taxanian Control of the Control of t			
STREET ADDRESS				et address				
CITY-ST-ZIP			6 4 CITY	-ST-ZIP	1		- 125 - 41 -	

I. I do 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.

SIGNATURE:

INTERIOR TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97 (407)645-4811

Daytime Phone