

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90356 020 \*\*\*150.00

0571440

**DOCUMENT # P95000089636**

1. Entity Name  
**FTB, INC.**

Principal Place of Business

17901 VON KARMAN  
IRVINE CA 92714

Mailing Address

17901 VON KARMAN  
IRVINE CA 92714

2. Principal Place of Business

3. Mailing Address

1900 Colonel Sanders Ln. C/O TRICOR  
Suite, Apt. #, etc. P.O. BOX 35910

City & State  
Louisville, KY

Zip 40213 Country USA

City & State  
Louisville, KY

Zip 402132 Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **93-1203908**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**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>D</b> <b>SMITH, RICHARD A</b> <b>17901 VON KARMAN</b> <b>IRVINE CA 92714</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO</b> <b>CRAIC, MAX</b> <b>17901 VON KARMAN</b> <b>IRVINE CA 92614</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO</b> <b>MARTIN MURPHY</b> <b>17901 VON KARMAN</b> <b>IRVINE CA 92714</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Cheryl Leister

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHERYL LEISTER

Date

(502) 874-8300

Daytime Phone #

CR2E034 (10/00)

The following is a list of officers and directors for the following entities:

**Taco Bell of America, Inc.**  
**Taco Enterprises, Inc.**  
**Calny, Inc.**  
**FTB, Inc.**  
**TBLD Corp.**  
**Taco Caliente, Inc.**  
**Tenga Taco, Inc.**  
**Taco Del Sur, Inc.**  
**Calny of Washington, Inc.**  
**Calny of Texas, Inc.**  
**Tres Taco, Inc.**  
**TB-Holdings**  
**Salsa Rio Grill**  
**Taco Bell of California, Inc.**

*Attachment*  
*#P9500008936*  
*753906*

Max Craig	Dir., President
Richard A. Smith	Dir., Vice President - Secretary
R. Bryce Shirley	Dir., Vice President - Assistant Secretary
Martin Murphy	Vice President - Chief Financial Officer (Treasurer)
Melissa Lora	Vice President
Jim Broersma	Vice President
Steven L. Emmons	Vice Pres., Assistant Secretary
Bridgette A. Berry-Smith	Assistant Secretary
Laurence Gerich	Assistant Secretary
Steve Rafferty	Assistant Secretary
Linda McDonald	Assistant Secretary
David Leach	Assistant Secretary
Remona Barbour	Assistant Secretary
Cheri Leistner	Assistant Secretary