

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State
 03-06-2000 90007 032 ***150.00

DOCUMENT # S29826

1. Entity Name
HOOTERS FOODS, INC.

Principal Place of Business 26133 US HWY 19 N STE 100 CLEARWATER FL 34623 US	Mailing Address 26133 US HWY 19 N STE 100 CLEARWATER FL 33763-2015 US
---	--

2. Principal Place of Business	3. Mailing Address
--------------------------------	--------------------

Suite, Apt. #, etc.	Suite, Apt. #, etc.
---------------------	---------------------

City & State	City & State
--------------	--------------

Zip	Country	Zip	Country
-----	---------	-----	---------



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3058302	Applied For ☐	Not Applicable ☐
------------------------------------	---	--

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

6. Name and Address of Current Registered Agent

**KIEFER, NEIL G.
 26133 US HWY 19 N
 STE 100
 CLEARWATER FL 34623**

7. Name and Address of New Registered Agent

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 _____ (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, 2000 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIEFER, NEIL G. 10451 LONGWOOD DRIVE SEMINOLE FL 33777 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DIGIANNANTONIO, GILBERT 3717 WOODRIDGE PLACE PALM HARBOR FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST RANIERI, WILLIAM 4794 PEBBLEBROOK, DRIVE OLDSMAR FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DROSTE, EDWARD C. 1700 MCMULLEN BOOTH RD. CLEARWATER FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, DENNIS 32 OAK AVE PALM HARBOR FL 34647 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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 supplement 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: Bruce W. Clark CFO 2/25/00 727-725-2551

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)