

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

FILED

**Jan 22 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 827213 (0)

1. Corporation Name
HARDEE'S FOOD SYSTEMS, INC.

Principal Place of Business 1233 NORTH CHURCH STREET P. O. BOX 1619 ROCKY MOUNT NC 27802-1619	Mailing Address 1233 NORTH CHURCH STREET P. O. BOX 1619 ROCKY MOUNT NC 27802-1619
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DO NOT WRITE IN THIS SPACE

21 Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified 12/22/1971	
4. FEI Number 56-0732584	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name		
82 Street Address (P.O. Box Number is Not Acceptable)		
83		
84 City	FL	85 Zip Code

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

12. OFFICERS AND DIRECTORS	
TITLE: S	<input checked="" type="checkbox"/> DELETE
NAME: CONDON, BREEN O.	
STREET ADDRESS: 3541 MANSFIELD DR.	
CITY-ST-ZIP: ROCKY MOUNT NC	
TITLE: TD	<input checked="" type="checkbox"/> DELETE
NAME: STRICKLAND, NANCY S.	
STREET ADDRESS: 104 CLAREMONT CT	
CITY-ST-ZIP: ROCKY MOUNT NC	
TITLE: C	<input checked="" type="checkbox"/> DELETE
NAME: AUTRY, ROBERT F.	
STREET ADDRESS: 103 WINDCHASE DRIVE	
CITY-ST-ZIP: ROCKY MOUNT NC	
TITLE: PCEO	<input checked="" type="checkbox"/> DELETE
NAME: MCMANUS, STEVE H.	
STREET ADDRESS: 1801 RIVERA DRIVE	
CITY-ST-ZIP: ROCKY MOUNT NC	
TITLE: SVPC	<input type="checkbox"/> DELETE
NAME: SPEED, JAMES H. JR.	
STREET ADDRESS: 12813 SHALLOWFORD DR.	
CITY-ST-ZIP: RALEIGH NC	
TITLE: VD	<input checked="" type="checkbox"/> DELETE
NAME: HALL, RICHARD L.	
STREET ADDRESS: 125 STEEPLECHASE RD	
CITY-ST-ZIP: ROCKY MOUNT NC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME: Rory J. Murphy	
1.3 STREET ADDRESS: 1233 HARDEE'S BLVD	
1.4 CITY-ST-ZIP: Rocky Mount, NC 27804-2815	
2.1 TITLE: S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME: M'Liss Jones Kang	
2.3 STREET ADDRESS: 1200 HARPER BLVD	
2.4 CITY-ST-ZIP: ANAHEIM, CA 92803	
3.1 TITLE: CBOD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME: C. THOMAS THOMPSON	
3.3 STREET ADDRESS: 1200 HARPER BLVD	
3.4 CITY-ST-ZIP: ANAHEIM, CA 92803	
4.1 TITLE: SVF	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME: Tom Lewiston	
4.3 STREET ADDRESS: 1233 HARDEE'S BLVD	
4.4 CITY-ST-ZIP: Rocky Mount, NC 27804-2815	
5.1 TITLE: D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME: William Foley II	
5.3 STREET ADDRESS: 1200 HARPER BLVD	
5.4 CITY-ST-ZIP: ANAHEIM, CA 92803	
6.1 TITLE: SVPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME: JAMES H. SPEED, JR	
6.3 STREET ADDRESS: 1233 HARDEE'S BLVD	
6.4 CITY-ST-ZIP: Rocky Mount, NC 27804-2815	

14. 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 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, unchanged, or on an attachment with an address.

SIGNATURE _____

CR2E034 (10/97)