## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000005115

Entity Name: PAPA JOHN'S USA, INC.

**Current Principal Place of Business:** 

2002 PAPA JOHN'S BLVD LOUISVILLE. KY 40299-2367

**Current Mailing Address:** 

2002 PAPA JOHN'S BLVD LOUISVILLE, KY 40299-2367

FEI Number: 61-1193912 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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:

Electronic Signature of Registered Agent

Date

FILED Apr 24, 2020

**Secretary of State** 

4205108673CC

## Officer/Director Detail:

Title	DIRECTOR, PRESIDENT, CEO	Title	TREASURER
Name	LYNCH, ROBERT M	Name	HOUSTON, CONNIE
Address	2002 PAPA JOHN'S BLVD	Address	2002 PAPA JOHN'S BLVD
City-State-Zip:	LOUISVILLE KY 40299-2367	City-State-Zip:	LOUISVILLE KY 40299-2367

Title AS Title S

NameTATE JOHNSON, DEBRANamePASSAFIUME, CLARA MAddress2002 PAPA JOHN'S BLVDAddress2002 PAPA JOHN'S BLVDCity-State-Zip:LOUISVILLE KY 40299-2367City-State-Zip:LOUISVILLE KY 40299

Title ASST. TREASURER Title CHIEF LEGAL & RISK OFFICER
Name PHENIX, CLAUDE Name OYLER, CAROLINE MILLER

Address 2002 PAPA JOHN'S BLVD Address 2002 PAPA JOHN'S BLVD

City-State-Zip: LOUISVILLE KY 40299-2367 City-State-Zip: LOUISVILLE KY 40299-2367

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DEBRA TATE JOHNSON

ASSISTANT SECRETARY

04/24/2020