

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25613

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** GARDEN FRESH RESTAURANT CORP.

**Current Principal Place of Business:**

15822 BERNARDO CENTER DRIVE, STE A  
SAN DIEGO, CA 92101 US

**New Principal Place of Business:**

**Current Mailing Address:**

15822 BERNARDO CENTER DRIVE, STE A  
SAN DIEGO, CA 92101 US

**New Mailing Address:**

**FEI Number:** 33-0028786      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KELLER, R. GREGORY  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

Title: CEOD  
Name: MACK, MICHAEL  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

Title: STD  
Name: MORBERG, JOHN  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

Title: VP  
Name: KEANE, KENNETH J  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

Title: D  
Name: ARCHAMBAULT, MICHAEL  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

Title: D  
Name: CALHOUN, KEVIN  
Address: 15822 BERNARDO CENTER DRIVE, STE A  
City-St-Zip: SAN DIEGO, CA 92101

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: LAURA LOUIS

POA

04/12/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date