

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P31265** (2)

1. Corporation Name  
**BRINKER FLORIDA, INC.**



Principal Place of Business: **6820 LBJ FREEWAY SUITE 200 DALLAS TX 75240**  
Mailing Address: **6820 LBJ FREEWAY SUITE 200 DALLAS TX 75240**

3. Date Incorporated or Qualified: **10/08/1990**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **75-2345082**  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPAS	1.1 TITLE
NAME	TOBIN, JAY	1.2 NAME
STREET ADDRESS	6820 LBJ FRWY	1.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	1.4 CITY-ST-ZIP
TITLE	CFOD	2.1 TITLE
NAME	SMITHART, DEBRA	2.2 NAME
STREET ADDRESS	6820 LBJ FREEWAY, STE200	2.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	2.4 CITY-ST-ZIP
TITLE	VPAS	3.1 TITLE
NAME	THOMSON, ROGER F	3.2 NAME
STREET ADDRESS	6820 LBJ FREEWAY STE 200	3.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	3.4 CITY-ST-ZIP
TITLE	VPAT	4.1 TITLE
NAME	SONSTEBY, CHARLES M.	4.2 NAME
STREET ADDRESS	6820 LBJ FREEWAY STE 200	4.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	4.4 CITY-ST-ZIP
TITLE	SRVP	5.1 TITLE
NAME	OWENS, RUSSELL G	5.2 NAME
STREET ADDRESS	6820 LBJ FRWY	5.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	5.4 CITY-ST-ZIP
TITLE	AS	6.1 TITLE
NAME	MAHONEY, BARBARA	6.2 NAME
STREET ADDRESS	6820 LBJ FRWY	6.3 STREET ADDRESS
CITY-ST-ZIP	DALLAS TX	6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE: *Charles M. Sonstebly* Charles M. Sonstebly (214) 770-9397  
SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR Date of Report

CR2E034 (12/95)