

1.) CORPORATION NAME:

**AFC Enterprises, Inc.**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATE CREATIONS NETWORK INC.  
4445 CORPORATION LANE, 2ND FLOOR  
VIRGINIA BEACH, VA 23462**

SCC ID NO: **F1125980**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	150,000,000
PREFER	2,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 Perimeter Center Terrace, Suite 1000

CITY/ST/ZIP: ATLANTA, GA 30346

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: HAROLD M COHEN TITLE: SR VP/GC/S ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: ATLANTA, GA 30346</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: CHERYL A BACHELDER TITLE: P/ CEO ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: ATLANTA, GA 30346</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: H MELVILLE HOPE III TITLE: CFO ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: ATLANTA, GA 30346</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JOHN M CRANOR, III TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: ATLANTA, GA 30346</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: R. WILLIAM IDE, III TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: ATLANTA, GA 30346</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Kelvin J Pennington TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: Atlanta, GA 30346</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Victor Arias Jr TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Carolyn Hogan Byrd TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John F Hoffner TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Krishnan Anand TITLE: DIRECTOR ADDRESS: 400 Perimeter Center Terrace, Suite 1000 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ HAROLD M COHEN	HAROLD M COHEN, SR VP/GC/S	10/23/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		