

1.) CORPORATION NAME:

Firehouse Subs Public Safety Foundation, Inc.

DUE DATE: **5/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**INCORP SERVICES INC
7288 HANOVER GREEN DR
MECHANICSVILLE, VA**

SCC ID NO: **F1897398**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3400-8 KORI ROAD

CITY/ST/ZIP: JACKSONVILLE, FL 32257

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.

NAME: ROBIN SORENSEN TITLE: PRESIDENT ADDRESS: 3400-8 KORI ROAD CITY/ST/ZIP/CO: JACKSONVILLE, FL 32257	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHRIS SORENSEN TITLE: SECRETARY ADDRESS: 311 W. KARI COURT CITY/ST/ZIP/CO: JACKSONVILLE, FL 32259	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JIM BROSCIOUS TITLE: DIRECTOR ADDRESS: 284 PLANTATION HILL DR. CITY/ST/ZIP/CO: GULF BREEZE, FL 32561	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BILL CARR TITLE: DIRECTOR ADDRESS: 9471 BAYMEADOWS RD., SUITE 303 CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHERI KOHLER TITLE: DIRECTOR ADDRESS: 3400-8 KORI ROAD CITY/ST/ZIP/CO: JACKSONVILLE, FL 32257	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOE MOORE TITLE: DIRECTOR ADDRESS: 946 ALCALA DRIVE CITY/ST/ZIP/CO: ST. AUGUSTINE, FL 32086	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY PETERSON DIRECTOR 10830 CREATIVE DRIVE JACKSONVILLE, FL 32218	<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/ ROBIN SORENSEN	ROBIN SORENSEN, PRESIDENT	5/27/2015	
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.			