

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
JACKSONVILLE  
SECRETARY OF STATE  
CORPORATE DIVISION

APPROVED  
AND  
FILED

9 MAY 11 AM 1:45

**DOCUMENT # 118817 (6)**

RECEIVED  
TALLAHASSEE, FLORIDA

**WINN-DIXIE STORES, INC.**

**Principal Office (If Different):**  
5050 EDGEWOOD COURT  
JACKSONVILLE FL 32254  
US

**Mailing Address:**  
5050 EDGEWOOD COURT  
JACKSONVILLE FL 32254  
US

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                               |                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3. Date Incorporated or Qualified<br><b>12/26/1928</b>                                                                                                        | 3a. Date of Last Report<br><b>04/13/1994</b> |
| 4. FEI Number<br><b>59-0514290</b>                                                                                                                            | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired<br><input type="checkbox"/>                                                                                                  | <b>\$8.75 Additional Fee Required</b>        |
| 6. Election Campaign Financing<br>Trust Fund Contribution<br><input type="checkbox"/>                                                                         | <b>\$5.00 may be Added to Fees</b>           |
| 8. This corporation has liability for intangible tax under S. 194.03, Florida Statutes<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                              |

|                                                 |                                  |
|-------------------------------------------------|----------------------------------|
| 2. Principal Office (If Different)<br><b>21</b> | 2a. Mailing Address<br><b>26</b> |
| State Apt. # etc.<br><b>22</b>                  | State Apt. # etc.<br><b>27</b>   |
| City & State<br><b>23</b>                       | City & State<br><b>28</b>        |
| Zip<br><b>24</b>                                | Zip<br><b>29</b>                 |
| Country<br><b>30</b>                            | Country<br><b>30</b>             |

**9. Name and Address of Current Registered Agent**

**BRAGIN, D H**  
**5050 EDGEWOOD CT**  
**JACKSONVILLE FL 32205**

**10. Name and Address of New Registered Agent**

**81** Name

**82** Street Address (If P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL 85** Zip Code **32254**

11. Pursuant to the provisions of Sections 607.04(2)(b) 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 understand the obligations of the Florida Statutes.

SIGNATURE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                                                                   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If Any) |                                                                              |
|----------------------------|-------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------|
| NAME                       | T<br>BRAGIN, D H<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL        | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | S<br>RIPLEY, W. E., JR.<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | CD<br>DAVIS, A. DANO<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL    | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | PD<br>KUFELDT, JAMES<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL    | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | D<br>DAVIS, T. WAYNE<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL    | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | VD<br>MCKELLAR, C.H.<br>5050 EDGEWOOD COURT<br>JACKSONVILLE FL    | NAME                                                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 194.03(1)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the incorporator/underwriter/registered agent for the corporation. I am familiar with and understand the obligations of the Florida Statutes, and that my signature appears on Block 13 of this filing as an addition with an address.

**SIGNATURE:** *D.H. Bragin* **D. H. Bragin** **4/13/95** **904/7835000**