

3-26-98 B 3746 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000058532 (0)
 1. Corporation Name
SNACK DISTRIBUTORS NETWORK, INC.



Principal Place of Business 2952 FORSYTHE ROAD WINTER PARK FL 32792	Mailing Address 2952 FORSYTHE ROAD WINTER PARK FL 32792
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/08/1994	
21		26		4. FEI Number 62-1575914	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
GRAY, DWAYNE 135 W CENTRAL BLVD 1100 ORLANDO FL 32801				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUCINELLI, TONY	1.2 NAME	
STREET ADDRESS	607 LICKING HOLE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ASHLAND VA 23005	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BYER, ANDY	2.2 NAME	
STREET ADDRESS	6916 VALJEAN AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	VAN NUYS CA 90406	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAUNER, RICHARD	3.2 NAME	
STREET ADDRESS	2952 FORSYTHE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLEMENS, TIM	4.2 NAME	
STREET ADDRESS	RELJACE & WILE AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SOUNDERTON PA 18964	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROCKHILL, PETE	5.2 NAME	
STREET ADDRESS	1617 HENDRICKS AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAUNER, RICHARD	6.2 NAME	
STREET ADDRESS	2952 FORSYTHE ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address.

SIGNATURE: *Richard S. Lauener* **RICHARD S. LAUNER**
 3-23-98 407-671-0152

CR2E034 (10/97)