

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 12 AM 7:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J04605 (8)

1. Corporation Name

Superior Almonds II, Inc.

Principal Place of Business

Mailing Address

800001454808

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/12/95 Date of Last Report 009
***200.00 ***200.00

3/17/86

4. FEI Number 59-265-0393 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 2120 South 1300 East

2a. Mailing Address

26 2120 South 1300 East

Suite, Apt. #, etc.

22 Suite 101

Suite, Apt. #, etc.

27 Suite 101

City & State

23 Salt Lake City, UT

City & State

28 Salt Lake City, UT

Zip

24 84106

Country

25 USA

Zip

29 84106

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Barbara J. Petroski
82 Street Address (P.O. Box Number is Not Acceptable) 100 W. Lucerne Circle
83 Suite 509
84 City Orlando FL 85 Zip Code 32801

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, 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 I certify the publication of, Section 607.0508, Florida Statutes.

SIGNATURE

Barbara J. Petroski

(NOTE: Registered Agent signature required when reinstating)

DATE 3-31-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

D. Finley Hamilton ☒ Change ☐ Addition
2120 South 1300 East, #101
Salt Lake City, UT 84106

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

P/D Marilyn Peterson ☒ Change ☐ Addition
2120 South 1300 East, #101
Salt Lake City, UT 84106

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

S Jennifer Tobler ☒ Change ☐ Addition
2120 South 1300 East, #101
Salt Lake City, UT 84106

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

☐ Change ☐ Addition
4/12

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information is included on this annual report or supplemental annual report in full and accurate and that my signature shall have the same legal effect as if made under oath, that I am a director or officer of the corporation or the receiver or trustee empowered to do so on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jennifer Tobler Jennifer Tobler 3/31/95 801-487-4045

(SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Telephone Number