FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 24 PM 3:12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **125444** **(0)**

1. Corporation Name

DIXIE DARLING BAKERS, INC.

Principal Place of Business	Mailing Address
5050 EDGEWOOD COURT JACKSONVILLE FL 32254 US	5050 EDGEWOOD COURT JACKSONVILLE FL 32254 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **11/07/1931**

3a. Date of Last Report: **04/13/1994**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: **59-0471662** ☐ 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

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

9. Name and Address of Current Registered Agent

PETERSON, RONALD D
5050 EDGEWOOD CT.
JACKSONVILLE FL 32254

10. Name and Address of New Registered Agent

81 Name: E. Ellis Zahrn, Jr.

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

83

84 City: **FL** 85 Zip Code

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: E. Ellis Zahrn, Jr. 04/17/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	11 TITLE	☒ Change ☐ Addition
NAME	BRAGIN, D. H.	12 NAME	
STREET ADDRESS	5050 EDGEWOOD COURT	13 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	14 CITY-ST-ZIP	32254
TITLE	VD	21 TITLE	☒ Change ☐ Addition
NAME	RIPLEY, W. E., JR.	22 NAME	S. W. Dixon
STREET ADDRESS	5050 EDGEWOOD COURT	23 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	24 CITY-ST-ZIP	32254
TITLE	V	31 TITLE	VD ☒ Change ☐ Addition
NAME	MCCOOK, R. P	32 NAME	
STREET ADDRESS	5050 EDGEWOOD CT	33 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE, FL 00000	34 CITY-ST-ZIP	32254
TITLE	PD	41 TITLE	☒ Change ☐ Addition
NAME	KUFELDT, JAMES	42 NAME	
STREET ADDRESS	5050 EDGEWOOD COURT	43 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	44 CITY-ST-ZIP	32254
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: D. H. Bragin 4/13/95 904/783-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE NUMBER

OP