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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

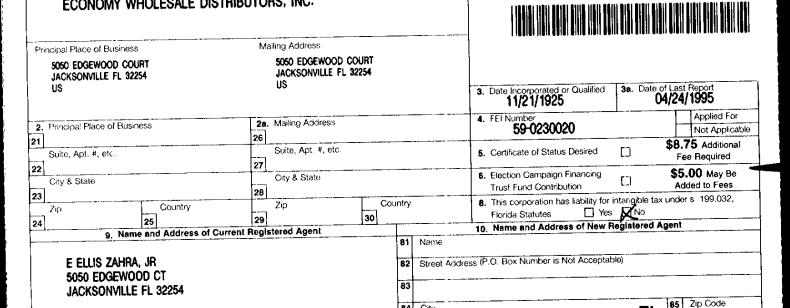
DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(2)

1. Corporation Name ECONOMY WHOLESALE DISTRIBUTORS, INC.



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 a thiorized 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.

City

SIGNATURE	grieture, typed or printed name of registered agent and title if app	houte NOTE:	Registered Agent signature required	when reinstalling) DATE
	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	TD	DELETE	1.1 TITLE	☐ Change ☐ Addition
	BRAGIN, D H		12 NAME	
NAME	5050 EDGEWOOD COURT		1.3 STREET ADDRESS	
STREET ADDRESS	JACKSONVILLE, FL 00000		1.4 CITY - ST - ZIP	
GITY-ST-ZIP	PD	DELETE	2.1 TITLE	Change Addition
TITLE	KUFELDT, JAMES		22 NAME	
NAME	5050 EDGEWOOD COURT		2.3 STREET ADDRESS	
STREET ADDRESS	JACKSONVILLE, FL 00000		2.4 CITY-ST-ZIF	
CITY-ST-ZIP	JACKSOTTILLE, I E 00000	T] DELETE	3 1 TITLE	Change Addition
TIILE	DIXON, J W	[] best le	32 NAME	
NAME	5050 EDGEWOOD COURT		33 STREET ADDRESS	
STREET ADDRESS				
CITY+ST-ZIP	JACKSONVILLE, FL 00000	☐ DELETE	3.4 CITY - ST - ZIP 4.1 TITLE	Change Addition
THLE	AD D	Distric		
NAME	MCCOOK, R. P		4.2 NAME	
STREET ADDRESS	5050 EDGEWOOD COURT		4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE, FL 00000		4.4 CITY-ST-ZIP	Change Addition
TITLE		DELETE	5 1 TITLE	F. 4.4 6. F.
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-SI-ZIP			5 4 CITY - ST - ZIF	☐ Change ☐ Addition
TITLE		DELETE	6 1 TITLE	Shange Xbanson
NAME			. 6.2 NAME	
STREET ADURESS			6.3 STREET ADDRESS	
CITY OF THE			6 4 CITY-ST-Z P	A CONTROL Florida Cratudos I furthor

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not cualify for the exemption stated in Section 119.07(3)(k). 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:

JW. Dixon 4-16-96