2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
05-18-2001 91249 007 ***150.00

DOCUMENT # P00000007749

1. Entity Name
WHOLESALE SOUTH DISTRIBUTING, INC.

Principal Place of Business	Mailing Address
6700 HWY. 27 N. DAVENPORT FL 33837	6700 HWY. 27 N. DAVENPORT FL 33837

551994

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. BOX 105035 Suite, Apt. #, etc. Attn: Tax Dept.
City & State	City & State ATLANTA GA
Zip / Country	Zip 30348-5035 / Country USA

4. FEI Number 59-3630535 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS $150.00 After MAY 1, 2001 Fee will be $550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FISHER, MICHAEL W 1 INDEPENDENT DR., STE. 2600 JACKSONVILLE FL 32202	☒ Delete	C/AS/CEO/D CARL BOLCH, JR. 6700 Hwy 27 N. DAVENPORT, FL 33837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	P/AS/D MAX LENKER 6700 HWY. 27 N. DAVENPORT, FL 33837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S/D SUSAN BASS BOLCH 6700 HWY. 27 N. DAVENPORT, FL 33837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T/CFO/AS ROBERT J. DUMBACHER 6700 HWY. 27 N. DAVENPORT, FL 33837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Gen Counsel/VP/AS CLAUDE P. CLAJA 6700 HWY. 27 N. DAVENPORT, FL 33837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R J Dumbacher TREASURER/CFO/AS 4/19/01 (770)431-7600, X.1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #