

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735474

Entity Name: EVER'MAN NATURAL FOODS CO-OP, INC.**Current Principal Place of Business:**315 W GARDEN ST
PENSACOLA, FL 32502**Current Mailing Address:**315 W GARDEN ST
PENSACOLA, FL 32502**FEI Number:** 59-1726593**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRAWICK, JOHN B
5101 NORTH 12TH AVENUE
PENSACOLA, FL 32504 US*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:** JOHN B. TRAWICK

05/27/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DEBLANDER, DAVE
Address 315 WEST GARDEN STREET
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name JACKSON, LYNN
Address 315 WEST GARDEN STREET
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name ODEN, KELLY
Address 315 W GARDEN ST
City-State-Zip: PENSACOLA FL 32502

Title TREASURER
Name SCHNEIDER, ERIC
Address 315 W GARDEN STREET
City-State-Zip: PENSACOLA FL 32502

Title VP
Name JONES, TARA
Address 315 W GARDEN ST
City-State-Zip: PENSACOLA FL 32502

Title SECRETARY
Name MELANCON, JEAN
Address 315 W GARDEN ST
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name SMITH, SANDRA KAYE
Address 315 W GARDEN ST
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name WINBORNE, SANDRA
Address 315 W GARDEN ST
City-State-Zip: PENSACOLA FL 32502

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVE DEBLANDER

P

05/27/2020

Electronic Signature of Signing Officer/Director Detail

Date