

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 240765

**FILED  
Mar 12, 2019  
Secretary of State  
1876545109CC**

**Entity Name:** GOLDEN RULE GROCERY, INC.

**Current Principal Place of Business:**

17505 SOUTH DIXIE HIGHWAY  
PERRINE, FL 33157

**Current Mailing Address:**

17505 SOUTH DIXIE HIGHWAY  
PERRINE, FL 33157

**FEI Number: 59-0936686**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MULLINS, PAMELA J  
17505 SOUTH DIXIE HIGHWAY  
PERRINE, FL 33157 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name FLORES, WALTER D  
Address 17505 SOUTH DIXIE HIGHWAY  
City-State-Zip: PERRINE FL 33157

Title VP,S  
Name MULLINS, PAMELA J  
Address 17505 SOUTH DIXIE HIGHWAY  
City-State-Zip: PERRINE FL 33157

Title VP  
Name REEDER, COURTNEY  
Address 17505 SOUTH DIXIE HIGHWAY  
City-State-Zip: PERRINE FL 33157

Title VP  
Name MULLINS-FLORES, TAYLOR C  
Address 17505 SOUTH DIXIE HIGHWAY  
City-State-Zip: PERRINE FL 33157

Title TREASURER, VP  
Name MULLINSFLORES, JORDAN T  
Address 17505 SOUTH DIXIE HIGHWAY  
City-State-Zip: PERRINE FL 33157

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PAMELA MULLINS**

**VP**

**03/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date