

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 2:32

DOCUMENT # 112252 (2)

1. Corporation Name

PUBLIX SUPER MARKETS, INC.

Principal Place of Business

1936 GEORGE JENKINS BLVD.
P.O. BOX 407
LAKELAND FL 33802

Mailing Address

1936 GEORGE JENKINS BLVD.
P.O. BOX 407
LAKELAND FL 33802

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/27/1921

3a. Date of Last Report

02/23/1994

4. FEI Number

59-0324412

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

2. Principal Place of Business

21

2a. Mailing Address

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BILLUPS, S. KEITH
1936 GEORGE JENKINS BLVD.
LAKELAND FL 33801**

10. Name and Address of New Registered Agent

81 Name

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

Signature, hand or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

**HOLLIS, MARK C.
1936 GEORGE JENKINS BLVD
LAKELAND FL**

STREET ADDRESS

CITY- ST- ZIP

TITLE

C

NAME

**JENKINS, HOWARD
1936 GEORGE JENKINS BLVD
LAKELAND FL**

STREET ADDRESS

CITY- ST- ZIP

TITLE

S

NAME

**BILLUPS, S. KEITH
1936 GEORGE JENKINS BLVD
LAKELAND FL**

STREET ADDRESS

CITY- ST- ZIP

TITLE

T

NAME

**JOHNSON, TINA P
1936 GEORGE JENKINS BLVD
LAKELAND FL**

STREET ADDRESS

CITY- ST- ZIP

TITLE

V

NAME

**JENKINS, CHARLES H JR.
1936 GEORGE JENKINS BLD
LAKELAND FL**

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change

☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

21 TITLE

☐ Change

☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

31 TITLE

☐ Change

☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE

☐ Change

☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE

☐ Change

☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE

☐ Change

☐ Addition

62 NAME

63 STREET ADDRESS

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 provided in Sections 133.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S. Keith Billups Secretary

1-26-95

813-688-1188

(Typed Name)