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Mar 10 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

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 33802-0407

3. Date Incorporated or Qualified: 12/27/1921
3a. Date of Last Report: 02/08/1996
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, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
BILLUPS, S. KEITH
1936 GEORGE JENKINS BLVD.
LAKELAND FL-33801 33815

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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: _____ (NOTE: Registered Agent signature required when reinstalling) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	CRENSHAW, WILLIAM E.	
STREET ADDRESS	1936 GEORGE JENKINS BLVD	
CITY - ST - ZIP	LAKELAND FL	
TITLE	C	<input type="checkbox"/> DELETE
NAME	JENKINS, HOWARD	
STREET ADDRESS	1936 GEORGE JENKINS BLVD	
CITY - ST - ZIP	LAKELAND FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BILLUPS, S. KEITH	
STREET ADDRESS	1936 GEORGE JENKINS BLVD	
CITY - ST - ZIP	LAKELAND FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	JOHNSON, TINA P	
STREET ADDRESS	1936 GEORGE JENKINS BLVD	
CITY - ST - ZIP	LAKELAND FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	JENKINS, CHARLES H JR.	
STREET ADDRESS	1936 GEORGE JENKINS BLD	
CITY - ST - ZIP	LAKELAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 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: *S. Keith Billups* S. Keith Billups 2/19/97 941-688-1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)