

118817

Annual Report
Filed 9-29-71

2 pgs.

Corporation Report and Tax Return for Foreign and Domestic Corporations

0401151

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Refer to This Number
in All Correspondence

This return is due
on July 1
1971.

WINN-DIXIE STORES INC
F H GIBBS JR
BOX B
JACKSONVILLE FLA 32201

PAY TO THE ORDER OF THE
BANK, BANKER, OR TRUST COMPANY OR ANY
FOR DEPOSIT ONLY
2408-A-118817
1/7/71

DEPARTMENT OF REVENUE

SEP-29-71 11942 # 1 199175187 RT 2000.00
(General Nature of Business) 2000.00

1. Winn-Dixie Stores, Inc.
(Give exact name of corporation)

2. Retail Grocery

3. Box B Jacksonville Duval Florida
(Street or Post Office Box of principal place of business) (City) (County) (State)

4. a. B. L. Thomas President Jacksonville
(Officers-Name) (Title) (Address)

b. R. D. Davis Vice President Jacksonville

c. F. H. Gibbes, Jr. Treasurer Jacksonville

d. J. S. Bryan, Jr. Secretary Jacksonville

5. a. James E. Davis Jacksonville
(Directors-Name) (Law requires at least (3) three) (Address)

b. A. D. Davis Jacksonville

c. Ben Hill Griffin, Jr. Frostproof, Fla.

d. Mills B. Lane, Jr. Atlanta, Ga.

6. F. H. Gibbes, Jr. 5050 Edgewood Ct. Jacksonville
(Resident Agent Name) (Address)

7. Last meeting of Directors 10/2/70 8. Corporation Active? Yes 9. If inactive, inactivity began _____
(Month - Day - Year) (Yes or No) (Month - Day - Year)

10. If inactive, will corporation begin business in the future? _____ 11. Date Incorporated 12/26/28 12. Date Qualified in Fla. _____
(Yes or No) (Month - Day - Year) (Month - Day - Year)

13. Total Authorized Capital Stock:

(No. of shares with par value)	\$ _____	(Par value each)
(No. of shares with par value)	\$ _____	(Par value each)
(No. of shares without par or nominal value)		

14. Outstanding Capital Stock: (issued)

(a)	\$ _____	\$ _____	(Total value)
(b)	(No. of shares with par value)	(Par value each)	(Total value)
(c)	(No. of shares without par or nominal value)		(Total actual value)
(d) Total (a) + (b) + (c)		\$ _____	(Total value)

15. Amount of tax Due \$ _____

16. Less Credit Memo if any \$ _____

17. Penalty and interest (see instructions) \$ _____

18. Amount of tax remitted with this return \$ 2,000.00 supp?

19. If foreign corporation, give amount of capital employed in Florida. \$ _____

20. If foreign corporation, give the number of States in which you do business. _____

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

By B. L. Thomas President or Vice President Attest: [Signature] Secretary

STATE OF Florida
COUNTY OF Duval

Personally appeared before me _____ B. L. Thomas
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 21st day of September 19 71