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Annual Report

Filed 6-27-44

4 pgs.

FROM  
R. A. GRAY  
SECRETARY OF STATE  
TALLAHASSEE, FLA.

ENTER

No. 9-18817- p

Tax for Years

1944

CORPORATION REPORT AND  
TAX RETURN OF

Winn & Lovett  
Grocery Company

P. O. ADDRESS

Filed in the office of the Secretary of State  
of the State of Florida, this.....  
day of ..... 27 1944

A. D. 19.....

.....  
Secretary of State.

SEC. 502 - P. L. & R.  
PERMIT NO. 5  
TALLAHASSEE, FLA.

(DO NOT DETACH)

Form D. C. T. R.—For Domestic Corporations.

# Corporation Report and Tax Returns

to the

## Secretary of State of Florida

As required by Senate Bill No. 734, Chap. 14677 (as amended) Laws of Florida, 1931

Date Rec. **JUN 27 1934**  
 Amt. Rec. **7.00**  
 Amt. of Tax .....

HON. R. A. GRAY, Secretary of State,  
Tallahassee, Florida.

SIR:

In compliance with the law above referred to we submit below information called for and enclose remittance for \$..... 200.00 .....to pay the tax imposed by said law.

(1) That Winn and Lovett Grocery Company  
(Give correct name of corporation)

Principal place of business..... Jacksonville, Florida

Insert to whom receipt is to be mailed..... E.W. Kavanaugh, Secretary-Treasurer

a corporation duly organized and existing under the law of the State of Florida, with its principal place of business within the State at..... Jacksonville ..... County

of..... Duval....., has designated and established..... Beaver & Barnett Sta.  
(Street or Building)

City of..... Jacksonville....., County of..... Duval....., State of

Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent..... E.W. Kavanaugh.....

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:  
Name

<u>A.D. Davis</u>	<u>President</u>	<u>Jacksonville, Fla.</u>
<u>H.L. Avery</u>	<u>Vice President</u>	"
<u>E.W. Kavanaugh</u>	<u>Secretary-Treasurer</u>	"

(3) NAMES AND ADDRESSES OF DIRECTORS:  
Name

<u>W.A. Lovett</u>	<u>Jacksonville, Fla.</u>
<u>A.D. Davis</u>	"
<u>S.H. Marks</u>	"
<u>F.B. Childress</u>	"
<u>J.E. Davis</u>	<u>Miami, Fla.</u>
<u>M.A. Davis</u>	"
<u>T.H. Davis</u>	"

(4) General nature of main business engaged in .....

Retail Grocer

(5) Date incorporated..... December 26, 1928

(See copy of law printed herein).

Date of last meeting of Board of Directors:.....June 21, 1944.....

Is Corporation active?.....Yes.....If inactive, state how long.....

Is the purpose of the Corporation to begin operations in the future?.....

### CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

2016 Preferred	\$100.00	201,600.00
3222 Class "A" shares of the par value of.....	18.50 each	59,607.00
65000 Common	1.00	65,000.00
5000 Common shares without nominal or par value	3.00	15,000.00

### OUTSTANDING CAPITAL STOCK AS FOLLOWS:

.....shares of the par value of.....each \$.....

.....shares without nominal or par value, fixed by

law for purpose of taxation at \$100.00 per share . . . \$.....

(See Section 12)

Total outstanding capital stock . . . \$.....341,207.00..

Tax as per schedule . . . \$.....200.00..

Note:—In the case of no par value shares, a financial statement should be submitted to show the actual value, and this will be the basis of the taxation; or the corporation may elect to value such shares at \$100.00 per share.

Only one report necessary where more than one year's tax is paid at the time of filing.

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

(SEAL)

*[Signature]*  
By President or Vice-President

ATTEST:

*[Signature]*  
Secretary

STATE OF FLORIDA,

COUNTY OF.....Duvall.....

Personally appeared before me.....*[Signature]*.....  
*[Signature]* Secretary, Treasurer of *[Signature]* who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this.....*[Signature]*..... day of

.....*[Signature]*....., 1944

(SEAL)

*[Signature]*  
(Signature of officer taking acknowledgments)  
Notary Public, State of Florida at Large  
My Commission Expires.....