

118817

Annual Report

Filed 7-28-69

2 pgs.

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida  
FLORIDA REVENUE COMMISSION  
Tallahassee, Florida

Refer to This Number 26-06-A-118817 This return is due July 1969  
PAY TO THE ORDER OF THE FLORIDA REVENUE COMMISSION  
MAIL CORRESPONDENCE TO: 7513  
FOR RETURN ONLY

WINN-DIXIE STORES INC  
P F ARNALL  
BOX B  
JACKSONVILLE FLA

26-06-A-118817  
12/26/28  
JUL 23-69 611709 J# 118817 ELST - RT 2,000.00

1. Winn-Dixie Stores, Inc. <small>(Give exact name of corporation)</small>		2. Retail Grocery <small>(General nature of business)</small>	
3. Box B <small>(Street or Post Office Box of principal place of business)</small>	Jacksonville <small>(City)</small>	Duval <small>(County)</small>	Fla. <small>(State)</small>
4. a. B. L. Thomas <small>(Officers-Name)</small>	President <small>(Title)</small>	Jacksonville <small>(Address)</small>	
b. R. D. Davis	V. President	Jacksonville	
c. H. L. Evans	V. President	Jacksonville	
d. P. F. Arnall	Treasurer	Jacksonville	
J. S. Bryan, Jr.	Secretary	Jacksonville	
5. a. James E. Davis <small>(Directors - Name) (Law requires at least (3) three)</small>		Jacksonville <small>(Address)</small>	
b. A. D. Davis		Jacksonville	
c. Ben Hill Griffin, Jr.		Frostproof, Fla.	
d. Mills B. Lane, Jr.		Atlanta, Ga.	

6. P. F. Arnall  
(Resident Agent Name) 5050 Edgewood Ct Jacksonville  
(Address)

7. Last meeting of Directors 10/4/68  
(Month - Day - Year)

8. Corporation Active?  Yes  No  
(Yes or No)

9. If inactive, inactivity began                       
(Month - Day - Year)

10. If inactive, will corporation begin business in the future?  Yes  No  
(Yes or No)

11. Date Incorporated 12/26/28  
(Month - Day - Year)

12. Date Qualified in Fla.                       
(Month - Day - Year)

13. Total Authorized Capital Stock:		14. Outstanding Capital Stock: (issued)	
(No. of shares with par value) _____ \$ _____ <small>(Par value each)</small>	(No. of shares with par value) _____ \$ _____ <small>(Par value each)</small>	(a) (No. of shares with par value) _____ \$ _____ <small>(Par value each)</small>	(Total value) _____
(No. of shares without par or nominal value) _____ \$ _____	(No. of shares without par or nominal value) _____	(b) (No. of shares with par value) _____ \$ _____ <small>(Par value each)</small>	(Total value) _____
		(c) (No. of shares without par or nominal value) _____	(Total value) _____
		(d) Total (a) + (b) + (c)	\$ _____ <small>(Total value)</small>

15. Amount of tax Due \$ \_\_\_\_\_

16. Less Credit \$ \_\_\_\_\_

17. Memo if any \$ \_\_\_\_\_

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

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. 29

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

By Robert D. Davis or V. President Attest: [Signature] 7513  
(Secretary)

STATE OF FLORIDA  
COUNTY OF DUVAL

Personally appeared before me Robert D. Davis  
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 10 day of July 19 69.

(Notary Seal) MY COMMISSION EXPIRES JUNE 23, 1972 [Signature]  
(Signature of Notary taking acknowledgment)

Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA  
Send First copy to Secretary of State, Tallahassee, Florida

ORIGINAL

(SEE INSTRUCTIONS ON BACK OF LAST COPY)