

118817

Annual Report

Filed 7-20-70

2 pgs.

ADDRESS CHANGE  
CORPORATION

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida  
DEPARTMENT OF REVENUE

Tallahassee, Florida

Refer to This Number  
in All Correspondence  
PAY TO THE ORDER OF THE BANK, BANKER, OR TRUST COMPANY  
FOR DEPOSIT ONLY  
N. P. 44-49

This return is due  
on July 1  
DEPARTMENT OF REVENUE

26-08-A-118817  
12/26/28

1970

WINN-DIXIE STORES INC  
F. H. Gibbes, Jr.  
BOX B  
JACKSONVILLE FLA

JUL-20-70 776059 J# 1-18817 5LST -- RT 2,000.00

(General nature of business) **2. Retail Grocery**

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

3. Box B Jacksonville Duval Fla.  
(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. G. P. Woodard Vice-President Jacksonville  
d. F. H. Gibbes, Jr. Treasurer Jacksonville  
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. Mrs Mills B. Lane, Jr. Atlanta, Georgia

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

7. Last meeting of Directors 10-3-69 8. Corporation Active? Yes 9. If inactive, inactivity began (Month - Day - Year)  
(Month - Day - Year) (Yes or No)

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

13. Total Authorized Capital Stock:

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

14. Outstanding Capital Stock: (issued)

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

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 V-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 6th day of July 19 70  
NOTARY PUBLIC, STATE OF FLORIDA AT LARGE  
(Notary Seal) MY COMMISSION EXPIRES JUNE 23, 1972  
Signature of Notary Taking Acknowledgment

Send Original (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA  
Send First copy to The Department of State, Tallahassee, Florida ORIGINAL  
FORM DR-105 (SEE INSTRUCTIONS ON BACK OF LAST COPY)