

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB - 1 AM 11:32

DOCUMENT # 326499 (1)

1. Corporation Name
FLORIDA JITNEY-JUNGLE STORES, INC.

Principal Place of Business Mailing Address
453 NORTH MILL STREET 453 NORTH MILL STREET
JACKSON MS 39202-3208 JACKSON MS 39202-3208

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/14/1968 3a. Date of Last Report 02/02/1994

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country

4. FEI Number 64-0466640 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

9. Name and Address of Current Registered Agent
HILL, LARRY
220 W. GARDEN STREET, 9TH FLOOR
PENSACOLA, FL
32501

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS	
TITLE	CPD
NAME	HOLMAN, W H JR
STREET ADDRESS	453 NORTH MILL ST
CITY - ST - ZIP	JACKSON MS
TITLE	D
NAME	HOLMAN, JR., C.H.
STREET ADDRESS	453 NORTH MILL STREET
CITY - ST - ZIP	JACKSON MS
TITLE	VD
NAME	MCCARTY JR, W B
STREET ADDRESS	453 NORTH MILL STREET
CITY - ST - ZIP	JACKSON MS
TITLE	VSD
NAME	FRIOU, ROGER P.
STREET ADDRESS	453 NORTH MILL ST.
CITY - ST - ZIP	JACKSON MS
TITLE	TC
NAME	BLACK, DAVID R
STREET ADDRESS	453 NORTH MILL ST
CITY - ST - ZIP	JACKSON MS
TITLE	AT
NAME	WALKER, EARL D
STREET ADDRESS	453 NORTH MILL ST
CITY - ST - ZIP	JACKSON MS

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: Roger P. Friou (ROGER P. FRIOU) Date: 1/25/95 (601) 948-0361