

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 26 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 330286

(6)

1. Corporation Name

WINN-DIXIE ATLANTA, INC.

Principal Place of Business

5050 EDGEWOOD COURT
JACKSONVILLE FL 32254
US

Mailing Address

5050 EDGEWOOD COURT
JACKSONVILLE FL 32254
US

3. Date Incorporated or Qualified

05/20/1968

3a. Date of Last Report

04/13/1994

2. Principal Place of Business

21 5400 Fulton Ind. Blvd.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

23 Atlanta, GA

27

City & State

28

Zip

29

Country

30

Country

31

City

32

Zip Code

33

City

34

Zip Code

35

City

36

Zip Code

37

City

38

Zip Code

39

City

40

Zip Code

41

City

42

Zip Code

43

City

44

Zip Code

45

City

46

Zip Code

47

City

4. FBI Number

59-1212119

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 100.022,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PETERSON, RONALD D
5050 EDGEWOOD CT
JACKSONVILLE FL 32254

10. Name and Address of New Registered Agent

81 Name

82 E. Ellis Zahra, Jr.

83 Street Address (P.O. Box Number is Not Acceptable)

84

City

85

Zip Code

86

City

87

Zip Code

88

City

89

Zip Code

90

City

91

Zip Code

92

City

93

Zip Code

94

City

95

Zip Code

96

City

97

Zip Code

98

City

99

Zip Code

100

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 resigning)

E. Ellis Zahra, Jr. 04/17/95

12. OFFICERS AND DIRECTORS

TITLE	TD
NAME	BRAGIN, D H
STREET ADDRESS	5050 EDGEWOOD COURT
CITY - ST - ZIP	JACKSONVILLE, FL 00000
TITLE	VD
NAME	KUFELDT, JAMES
STREET ADDRESS	5050 EDGEWOOD COURT
CITY - ST - ZIP	JACKSONVILLE, FL 00000
TITLE	PD
NAME	HESS, H E
STREET ADDRESS	5400 FULTON IND. BLVD.
CITY - ST - ZIP	ATLANTA GA
TITLE	V
NAME	MCCOOK, R. P
STREET ADDRESS	5050 EDGEWOOD COURT
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	SV
NAME	RIPLEY, W. E., JR.
STREET ADDRESS	5050 EDGEWOOD COURT
CITY - ST - ZIP	JACKSONVILLE, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	32254
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	32254
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	D
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	30336
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	32254
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	S.W. Dixon
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	32254
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	P. S. R. Pownall
6.3 STREET ADDRESS	5400 Fulton Ind. Blvd.
6.4 CITY - ST - ZIP	Atlanta, GA 30336

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)(b), 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:

D. H. Bragin

D. H. Bragin

4/13/95

904/783-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone