

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 330286

FILED
Apr 14, 2005
Secretary of State

Entity Name: WINN-DIXIE MONTGOMERY, INC.

Current Principal Place of Business:

1550 JACKSON FERRY ROAD
MONTGOMERY, AL 361041718 US

New Principal Place of Business:

Current Mailing Address:

5050 EDGEWOOD COURT
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 59-1212119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: LAZARAN, FRANK
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: VD () Delete
Name: SHEEHAN, J R
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: DVAS () Delete
Name: BYRUM, D M
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: DVT () Delete
Name: HARDEE, K D
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: VS () Delete
Name: APPEL, L B
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: V () Delete
Name: CHERRY, K B
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: LYNCH, P L
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: P (X) Change () Addition
Name: MEDINA, J P
Address: 5050 EDGEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. M. BYRUM

DVAS

04/14/2005

Electronic Signature of Signing Officer or Director

Date