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FILED

May 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 344600 (2)

1. Corporation Name  
KING PROVISION CORPORATION

Principal Place of Business

9009 REGENCY SQUARE BLVD  
JACKSONVILLE FL 32211-8118

Mailing Address

9009 REGENCY SQUARE BLVD  
JACKSONVILLE FL 32211-8118



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

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2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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3. Date Incorporated or Qualified

04/15/1969

3a. Date of Last Report

05/01/1996

4. FEI Number

50-1283120

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

STEIN, DAVID A  
9009 REGENCY SQUARE BLVD  
JACKSONVILLE FL 32203

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
CD	STEIN, DAVID	9009 REGENCY SQ BLVD	JACKSONVILLE FL	<input type="checkbox"/>
PD	HICKS, EDWARD F.	9009 REGENCY SQ BLVD	JACKSONVILLE FL	<input type="checkbox"/>
ST V	CARLSON, MARC	9009 REGENCY SQ BLVD	JACKSONVILLE FL	<input type="checkbox"/>
VD	STEIN, MARTIN E., JR.	9009 REGENCY SQ BLVD	JACKSONVILLE FL	<input type="checkbox"/>
VD	STEIN, RICHARD W.	9009 REGENCY SQ BLVD	JACKSONVILLE FL	<input type="checkbox"/>
VD	STEIN, ROBERT L	9009 REGENCY SQUARE BLVD	JACKSONVILLE FL 32211	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
1.1	AI Juodvalkis	9009 Regency Square Blvd	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1	Tim Dyer	9009 Regency Square Blvd.	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1	Tim Danielson	9009 Regency Square Blvd.	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1	Bill Bowers	9009 Regency Square Blvd.	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1	Paula French	9009 Regency Square Blvd.	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.1	Ann E. Sikes	9009 Regency Square Blvd.	Jacksonville, FL 32211	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/97 (904) 725-4122  
Date Daytime Phone #

CR2E034 (9/96)