## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 359970 1. Corporation Name

TAMPA MAID FOODS, INC.

| Principal Diago of Durings                |   |
|---|---|
| Principal Place of Business               | Mailing Address                           |
| 1958 MONROE DRIVE. NE<br>ATLANTA GA 30324 | 1958 MONROE DRIVE. NE<br>ATLANTA GA 30324 |
|   |   |

## **FILED** Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90025 028 \*\*\*150.00



| 1958 MONROE<br>ATLANTA GA |   |  |                       |            |   | DO NOT WRITE IN TURE   | D. 65             |                              |
|---------------------------|---|--|-----------------------|------------|---|--|-------------------|------------------------------|
|                           |   |  |                       |            |   | DO NOT WRITE IN THIS S   | MACE              | ·                            |
|                           |   |  |                       |            |   | 3. Date Incorporated or Qualifed 02/20/1970  |                   |                              |
| 2. Principal I            | Place of Business   | 2a. Mailing Address  |                       |            |   | 4. FEI Number  |                   | Applied For                  |
| 21                        |   | 26   |                       |            |   | 58-1098543   | H                 | Not Applicat                 |
| Suite, Apt                | #, etc.   | Suite, Apt. #, etc.  |                       |            |   |  | \$8.7             | 5 Additional                 |
| 22                        |   | 27   | =                     |            |   | 5. Certifcate of Status Desired  |                   | Required                     |
| City & Sta                | ite   | City & State   |                       |            |   | 6. Election Campaign Financing   | <del></del>       | 00 May Be                    |
| 23                        |   | 28   |                       |            |   | Trust Fund Contribution  | ,                 | ии мау ве<br>ed to Fees      |
| Zip                       | Country   | Zip  | Cour                  | ntry       |   | ·  |                   | ed to rees                   |
| 24                        | 25 29 30  |  |                       |            | 8. This corporation owes the current year Intangible Personal Property Tax.  Yes No |  |                   |                              |
|                           | 9. Name and Address of Curre  |  | 1301                  |            |   | 10. Name and Address of New Registered Ag  |                   |                              |
|                           |   |  |                       | 81         | Name  | THE TANKE BITTE STORY OF THE BITTE OF THE  | ion.              |                              |
| CT (                      | CORPORATION SYSTEM  |  | L                     | $_{\perp}$ |   |  |                   |                              |
| 1200                      | D S. PINE ISLAND ROAD   |  | [*                    | 82         | Street Add  | Iress (P.O. Box Number is Not Acceptable)  |                   |                              |
|                           | NTATION FL 33324  |  | J.,                   | 83         |   | <del></del>  |                   |                              |
|                           |   |  | [                     | 63         |   |  |                   |                              |
|                           |   |  | Ja                    | 84         | City  | · · · · · · · · · · · · · · · · · · ·  | 85 2              | ip Code                      |
| <del></del>               |   |  |                       | _          | •   | <b>№</b> L   | J                 | •                            |
| OINGE OF S                | registered agent, or both, in the State<br>am familiar with, and accept the oblig | e di Fiorida. Such chande was al   | utnorizea i           | DV T       | ne comorati   | poration submits this statement for the purpose of chion's board of directors. I hereby accept the appointment | anging<br>nent as | its registered<br>registered |
| SIGNATURE                 | <b>V</b>  | ,  |                       |            |   |  |                   |                              |
| SIGNATURE                 | Signature, typed or printed name of registered ag                                 | ent and title if applicable. (NOTE   | Registered A          | gent       | signature require   | ed when reinstating) DATE  |                   |                              |
| 12.                       |   | ND DIRECTORS   | 13.                   |            |   | ADDITIONS/CHANGES TO OFFICERS AND  | DIREC             | TOPS IN 12                   |
| TITLE                     | D   | <b>⚠</b> DELETE  | 1,1 TITL              | E          |   |  | Chan              |                              |
| NAME                      | WATKINS, BILL   |  | 1.2 NAM               | 4F         |   | _  |                   | g- L-1,100                   |
| STREET ADDRESS            |   |  |                       |            | ADDRESS   |  |                   |                              |
| CITY-ST-ZIP               | LAKELAND, FL 00000  |  |                       |            |   |  |                   |                              |
| TITLE                     | CDP   | ☐ DELETE   | 1.4 CITY              |            | ·ZIP  |  |                   | Free a con-                  |
| NAME                      | 1   | Detere   | 2.1 TITU              |            | ]   |  | ] Chang           | ge 🗀 Additi                  |
|                           | WATKINS, GEORGE   |  | 2.2 NAM               | Œ          |   |  |                   |                              |
| STREET ADDRESS            |   | and the same of th | 2.3 STRE              | EET A      | ADDRESS   |  |                   |                              |
| City-ST-ZIP               | ATLANTA, GA 00000   |  | 2. 4 CITY             | Y-ST       | -ZIP  |  |                   |                              |
| TITLE                     | ST  | ☐ DELETE   | 3.1 TITLE             | Ε          |   |  | Chang             | je 🔲 Additi                  |
| NAME                      | ready, george w Jr  |  | 3.2 NAM               | E          |   |  |                   |                              |
| STREET ADDRESS            | 1958 MONROE DR NE   |  | 3.3 STRE              | EETA       | ADDRESS   |  |                   |                              |
| CITY-ST-ZIP               | ATLANTA, GA 00000   |  | 3.4. CITY             | /-ST-      | . ZIP   |  |                   |                              |
| TITLE                     | VP  | ☐ DELETE   | 4.1 TITLE             |            |   | Γ  | ? Chang           | e 🗌 Additi                   |
| NAME                      | SMITH, ED   | •  | 4. 2 NAM              |            |   |  |                   |                              |
| STREET ADDRESS            | 4822 ANDERSON AVE   |  |                       |            | JDDRESS (   |  |                   |                              |
| CITY-ST-ZIP               | TAMPA FL  |  |                       |            | 1   |  |                   |                              |
| TITLE                     | DV  |  | 4.4 CITY-             |            | <u> </u>  |  | 3.01              | prima . 1                    |
| NAME                      |   | C) ACTE IS   | 5.1 TITLE<br>5.2 NAME |            |   |  | ] Chang           | e [] Additio                 |
| J                         | FREEMAN, WILLIAM A  |  |                       | -          | DEDMOS  |  |                   |                              |
| STREET ADDRESS            | 1946 MONROE DRIVE, N.E.   |  | 5.3 STRE              |            |   |  |                   |                              |
| CITY-ST-ZIP               | ATLANTA GA  |  | 5.4 CITY-             |            | ZIP   |  |                   |                              |
| TITLE                     |   | ☐ DELETE   | 6.1 TITLE             | •          | -   |  | Chang             | e 🔲 Additio                  |
| NAME                      |   | •  | 6.2 NAME              | E          | 1   |  |                   |                              |
| STREET ADDRESS            |   |  | 6.3 STRÉ              | ET A       | DDRESS  |  |                   |                              |
| CITY ST. 7ID              |   |  | 0.4.0004              | AT :       | J   |  |                   |                              |

14. I 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 suppliemental 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, with all other like empowered.