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Apr 25 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 # 422422 (6)

1. Corporation Name
WINN-DIXIE CHARLOTTE, INC.

Principal Place of Business

Mailing Address

2401 NEVADA BLVD.
CHARLOTTE NC 28273
US

5050 EDGEWOOD COURT
JACKSONVILLE FL 32254-3601
US



3. Date Incorporated or Qualified 03/30/1973
3a. Date of Last Report 04/25/1996

4. FEI Number 56-1041775
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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

E. ELLIS ZAHRA, JR.
5050 EDGEWOOD COURT
JACKSONVILLE FL 32254

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: Type or print name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME KUFELDT, JAMES
STREET ADDRESS 5050 EDGEWOOD COURT
CITY - ST - ZIP JACKSONVILLE, FL 00000

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE TD
NAME BRAGIN, D H
STREET ADDRESS 5050 EDGEWOOD CT
CITY - ST - ZIP JACKSONVILLE, FL 00000

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE D
NAME MCDONALD, T.E.
STREET ADDRESS 2401 NEVADA BLVD.
CITY - ST - ZIP CHARLOTTE, NC 00000

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE S
NAME J.W. DIXON
STREET ADDRESS 5050 EDGEWOOD COURT
CITY - ST - ZIP JACKSONVILLE, FL 00000

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE V
NAME MCCOOK, R. P.
STREET ADDRESS 5050 EDGEWOOD CT.
CITY - ST - ZIP JACKSONVILLE FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE P
NAME B.B. TRIPP
STREET ADDRESS 2401 NEVADA BLVD.
CITY - ST - ZIP CHARLOTTE NC

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/97 904/783-5117

CR2E034 (9/96)