

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90478 003 ***150.00

DOCUMENT # 506650

1. Entity Name
SOUTHERN GROCERY COMPANY



Principal Place of Business
**4050 MIDDLE AVE.
47TH ST. INDUSTRIAL PARK
SARASOTA FL 34234**

Mailing Address
**4050 MIDDLE AVE.
47TH ST. INDUSTRIAL PARK
SARASOTA FL 34234**

2. Principal Place of Business

3. Mailing Address

P.O. BOX 49855

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

SARASOTA, FLA

Zip

Country

Zip

Country

34234

US

4. FEI Number

59-1678042

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WALKER, DANIEL M.
4050 MIDDLE AVENUE
47TH ST., INDUSTRIAL PARK
SARASOTA FL 34234**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **CD**
STREET ADDRESS **WALKER, DAN M.**
CITY-ST-ZIP **1656 BLUE HERON DR
SARASOTA, FL 0**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **WALKER, RICHARD B.**
CITY-ST-ZIP **3671 BENEVA OAKS DR
SARASOTA, FL 0**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **DONELSON, CHARLES J**
CITY-ST-ZIP **5010 COCO PLUM WAY
SARASOTA FL 34241**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RICHARD B. WALKER 1-10-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**941
346-7946**

CR2E034 (10/02)