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Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706242 (5)

1. Corporation Name

FLORIDA SCHOOL FOOD SERVICE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

124 SALEM COURT
TALLAHASSEE FL 32301124 SALEM COURT
TALLAHASSEE FL 32301-28103. Date Incorporated or Qualified
10/04/19633a. Date of Last Report
04/12/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

59-6044207

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUDD, FRANK EXECUTOR DIRECTOR
C/O FLORIDA SCHOOL SERVICE ASSOC
124 SALEM COURT
TALLAHASSEE FL 32301

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 617.0502 and 617.1508, 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 617.0503, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD ☒ DELETE
NAME MULLINS, FRANK
STREET ADDRESS 1990 25TH STREET
CITY-ST-ZIP VERO BEACH FL1.1 TITLE TD ☐ Change ☒ Addition
1.2 NAME Hastings, Margaret
1.3 STREET ADDRESS 4311 North Stanley Road
1.4 CITY-ST-ZIP Plant City FL 33565TITLE SD ☐ DELETE
NAME WELSH, JOYCE
STREET ADDRESS 114 HUNTER ST
CITY-ST-ZIP CHARLOTTE HARBOR FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME Same
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE P ☒ DELETE
NAME THORSON, BETH
STREET ADDRESS 7061 GARDEN RD
CITY-ST-ZIP RIVIERA BEACH FL3.1 TITLE present ☒ Change ☒ Addition
3.2 NAME Karen Kennedy
3.3 STREET ADDRESS 5411 11th Street
3.4 CITY-ST-ZIP Sarasota FL 34232TITLE D ☐ DELETE
NAME RUDD, FRANK
STREET ADDRESS 124 SALEM CT
CITY-ST-ZIP TALLAHASSEE FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME SAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE President-Elect ☐ Change ☒ Addition
5.2 NAME Mary Kate Harrison
5.3 STREET ADDRESS 9011 E Kennedy
5.4 CITY-ST-ZIP Tampa FL 33601TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0007307

CR2E037 (9/96)