FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR -9 PM 1:16
TALLAHASSEE, FLORIDA

000717

DOCUMENT # 706242

1. Corporation Name
FLORIDA SCHOOL FOOD SERVICE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
124 SALEM COURT TALLAHASSEE FL 32301	124 SALEM COURT TALLAHASSEE FL 32301

[redacted]

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified: 10/04/1963
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number: 59-6044207 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name: Executive Director
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HASTING, MARGARET 4311 N. STANLEY RD PLANT CITY FL	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	T Jero, Linda 3485 Willis Rd Mulberry FL 33860	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ZAPF, NANCY 7061 GARDEN RD RIVERIERA BEACH FL 33404	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	S Zapf, Nancy 7061 Garden Rd Riveriera Beach, FL 33404	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MULLINS, FRANK 1426 19TH ST VERO BEACH FL 32960	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	PD Mullins, Frank 1426 19th St Vero Beach FL 32960	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUDD, FRANK 124 SALEM CT TALLAHASSEE FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Rudd, Frank 124 Salem Ct Tallahassee 32301	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HARRISON, MARY KATE 901 E KENNEDY TAMPA FL	☑ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	VD Beverly Girard 101 Old Venice Rd Osprey, FL 34229	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	02-22-1999 90042 04561251	☐ Change ☐ Addition

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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/13/98 850 878 1832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

T.S. 3/15/99

CR2E037 (11/98)