2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 24, 2006 8:00 am Secretary of State

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DOCUMENT # 712447 1. Entity Name PUBLIX SUPER MARKETS CHARITIES, INC.				. 1	2-24-2006 90	•	
Principal Place 3300 AIRPOF LAKELAND, F	rt rd	Mailing Address P. O. BOX 407 LAKELAND, FL 33815	US	400-			
2. Principal Place of Business 3300 Publix Oxporat Park Jay							
Suite, Apt. #, etc.				02132006 C	hg-NP	CR2E037 (11/	05)
Meland Pl		City & State			19		Applied For Not Applicable
3381	Country	Zip	Country	5. Certificate of S	itatus Desired	□ \$8.75 Fee Re	Additional quired
6. Name and Address of Current Registered Agent				7. Name and Add	dress of New Rec	gistered Agent	
JOHNSON, TINA			Name	Name			
1936 GEORGE JENKINS BLVD LAKELAND, FL 33815			Street Add	ress (P.O. Box Number is	Not Acceptable)		
			- 1				
			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 or registered agent an	d title if applicable. (NOTE: Re	egistered Agent signature	required when reinstating)		DATE	· · · · · · · · · · · · · · · · · ·
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10	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campa Trust Fund Con	aign Financing tribution.	\$5.00 May Be Added to Fees	Florid	ke check paya la Department	of State
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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 AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR

2-15-06

863-686-1188 Daytime Phone