FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED Feb 13 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # F56803 KELLY'S FOODS, INC. Principal Place of Business Mailing Address 808 W. AMELIA ST. 650 CARTER ROAD P. O. BOX 5816 POST OFFICE BOX 770187 ORLANDO FL 32805-1404 WINTER GARDEN FL 34787-4100 3. Date Incorporated or Qualified 3a. Date of Last Report 12/02/1981 03/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 650 Carter Road 59-2147286 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Winter Garden. Florida 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 34787 Orange 34777-0187 Orange 24 25 29 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KELLY, KENNETH M. Name 650 CARTER RD 82 Street Address (P.O. Box Number is Not Acceptable) **WINTER GARDEN FL 34787** 83 84 Citv 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, typeo or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) TITLE DELETE 1.1 TITLE Change KELLY, DALE M NAME 1.2 NAME 214 S. WOODLAND STREET STREET ADDRESS 1.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition | KELLY, KENNETH M., SR. NAME 2.2 NAME 2905 MIDSUMMER DRIVE STREET ADDRESS 2.3 STREET ADDRESS WINDERMERÉ FL CITY-ST-ZIP 2 4 CITY - S1 - ZIP DELETE TITLE 3 1 TITLE Change Addition KELLY, SHARON NAME 3.2 NAME 2905 MIDSUMMER DR. STREET ADDRESS 3.3 STREET ADDRESS WINDERMERE FL CITY - \$1 - ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREFT ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TULE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

14. To 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 of 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 peport as required by Chapter 607. Florida Statutes; and that my name

anged, or on an attachment with

appears in Block 12 or Block 13 if ch