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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

F93000003848 (9)

D&C FOODS, INC.

Principal Place of Business Mailing Address 4015 WETHERBURN WAY 4015 WETHERBURN WAY BUILDING B. STE. 200 BUILDING B. STE. 200 NORCROSS GA 30092 DO NOT WRITE IN THIS SPACE NORCROSS GA 30092 3. Date Incorporated or Qualified 08/20/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-1954941 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zip Code

11. Pursuant to the provisions of Sections 607.05.02 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 Statutes was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DETETE Change Addition 1.1 TITLE TITLE HOOVER, CARL HAYES 1.2 NAME NAME 4015 WETHERBURN WAY, BLDG. B, #200 STREET ADDRESS 1.3 STREET ADDRESS NORCROSS GA 30092 1.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME HOOVER, DUANE L 22 NAME 4015 WETHERBURN WAY, BLDG. B. #200 STREET ADDRESS 2.3 STREET ADDRESS NORCROSS GA 30092 CITY-\$1-ZIP 2 4 CITY-ST-ZIP DELLITE Change Addition TITLE 31 TITLE BENNETT, PATRICIA H NAME 32 NAME 4015 WETHERBURN WAY, BLDG. B, #200 STREET ADDRESS 3 3 STREET ADDRESS NORCROSS GA 30092 CITY-ST-ZIP 3.4. CITY - ST-ZIP Change Addition 4.1 TILLE TITLE HOOVER, DUANE L 4 2 NAME NAME 4015 WETHERBURN WAY, BLDG. B. #200 4.3 STREET ADDRESS STREET ADDRESS NORCROSS GA 30092 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Addition Change 61 TITLE TITLE NAME 62 NAME STREET ADORESS 6.3 STHEET ADDRESS

14. Thereby certify that the information supplied with this filling 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 supplied with this filling 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 supplied with this filling 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 supplied with this filling 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 supplied with this filling 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 supplied with this filling 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 supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on the informatio

SIGNATURE:

Chane J. Hoove

2-19-98

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Feb 25 1998 8:00am

Secretary of State

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