


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

FILED
Feb 24 1998 8:00am
Secretary of State

| | | |
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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **F95000004891 (6)**

1. Corporation Name

CREATIVE FOOD MANAGEMENT, INC.



Principal Place of Business

**3 GREENWICH OFFICE PARK
GREENWICH CT 06831**

Mailing Address

**3 GREENWICH OFFICE PARK
GREENWICH CT 06831**

DO NOT WRITE IN THIS SPACE

| | | | | | |
|---------------------------------------|---------------------|----------------------------|---------------------|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 10/10/1995 | |
| 21 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. | 4. FEI Number 34-1714149 | Applied For <input type="checkbox"/> Not Applicable |
| 22 | City & State | 27 | City & State | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 23 | Zip | 28 | Zip | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 24 | Country | 29 | Country | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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 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, 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 | P <input checked="" type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RICHARD E. KERLEY | 1.2 NAME | SEE ATTACHED LIST |
| STREET ADDRESS | 52 GREY ROCKS RD | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | WILTON CT | 1.4 CITY-ST-ZIP | |
| TITLE | S <input checked="" type="checkbox"/> DELETE | 2.1 TITLE | |
| NAME | SPECTOR, RANDY B | 2.2 NAME | |
| STREET ADDRESS | 6 BARN SWALLOW DROVE | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | WESTPORT CT | 2.4 CITY-ST-ZIP | |
| TITLE | T <input checked="" type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BARBER, NELSON | 3.2 NAME | |
| STREET ADDRESS | 70 HAT SHOP HILL | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | BRIDGEWATER CT | 3.4 CITY-ST-ZIP | |
| TITLE | AS <input checked="" type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ELLEN KEATS | 4.2 NAME | |
| STREET ADDRESS | 42 PERKINS RD | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | GREENWICH CT | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ellen Keats

ELLEN KEATS, JULLIA 203-624-4320

CR2E034 (10/97)

CREATIVE FOOD MANAGEMENT, INC.

**OFFICERS
and
DIRECTORS**

- 1) Randy B. Spector – President (Sole Director)
6 Barn Swallow Drove
Westport, CT 06880

- 2) Robert F. Barney -- Executive Vice President
76 Seminary Street
New Canaan, CT 06840

- 3) Ellen Keats – Secretary
42 Perkins Road
Greenwich, CT 06830

- 4) Catherine B. James – Treasurer
Two Oakwood Lane
Greenwich, CT 06830