2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 20, 2001 8:00 am DOCUMENT # F96000002813 **Secretary of State** SAVANNAH FOODS INDUSTRIAL, INC. 02-20-2001 90029 014 ***150.00 Principal Place of Business Mailing Address P.O. BOX 339 P.O. BOX 339 SAVANNAH GA 31402 SAVANNAH GA 31402 1.9 LY 20 Mailing Address Principal Place of Business 9 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2181649 WANNAH Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Deiete TITI F Change TITLE ROCHE, DAVID H NAME NAME 2 EAST BRYAN STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA PRESIDENT + C OXNARD, JR. TITLE Delete TITLE OXNARD JR, BENJAMIN A NAME NAME 2 EAST BRYAN STREET STREET ADDRESS STREET ADDRESS CITY-ST-7(P SAVANNAH GA CITY-ST-ZIP ☐ Change ☐ Addition Delete. TITLE TITLE KRESS, WALT NAME NAME STREET ADDRESS 2 EAST BRYAN STREET STREET ADDRESS CITY-ST-ZIP SAVANNAH GA CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME DEAL, BARRY NAME STREET ADDRESS STREET ADDRESS 26 BRYAN CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31402 SRVD Delete TITLE *Change ☐ Addition TITLE SCHWER, WILLIAM F. NAME NAME 8016 HWY 90 A STREET ADDRESS STREET ADDRESS 2E BRYAN ST CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31402 TITLE AS ☐ Delete TITLE ☐ Addition NAME CORDES, ROY JR NAME STREET ADDRESS STREET ADDRESS 2E BRYAN ST CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31402 13. 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR