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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F96000006535 (6)

SSE FOODS, INC.

## **FILED** Feb 04 1998 8:00am Secretary of State



Principal Place of Business 115 W COLLEGE DR		Mailing Address 115 W COLLEGE DR				. realies ing tana still sailt sailt sailt sailt sailt still (52)			
MARSHALL N	IN 58258	Marshall MN 56258							
						DO NOT WRITE IN	THIS SPAC	5	
						3. Date Incorporated or Qualified			
L						12/13/1996			
H	Place of Business	2a. Mailing Address				4. FEI Number		App	lied For
21		26				41-1713393		Not	Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc				5. Certificate of Status Desired S8.75 Additional			
22		27					f	ee Req	uired
City & State		Cily & State				6. Election Campaign Financing	_ \$5.00 May Be		
Zip	Country		28			Trust Fund Contribution [	Added to Fees		
	Country	Zip		untry		8. This corporation owes or has paid			٠ ،
24	25	29	30	т—-			ersonal Property Tax due June 30. Yes No		
	9. Name and Address of Curre	nt Registered Agent		B1	Manage	10. Name and Address of New Regis	tered Agent		
	CORPORATION SYSTEM			"	Name				ľ
1200 SOUTH PINE ISLAND ROAD				82	Street	Address (P.O. Box Number is Not Acceptable)			
PD	antation FL 33324								
				83					
				84	City		los l	Zip Co	
					•		FL  85	•	ľ
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stat	utes, the a	povo	-named	corporation submits this statement for the purp	ose of chan	ging its	registered
agent. I a	m familiar with, and accept the oblig	e of Floridal Such change wa: rations of, Section 607.0505, :	s aumonze Florida Sta	a by lutes	the cor	poration's board of directors. I hereby accept the	ie appointme	int as re	gistered
SIGNATURE									ĺ
OIOHATONE	Signature, typed or printed name of registered ag	ent and title if applicable (N	O1: Registere	d Age	4 & gnalun	u required when reinstating)	JA1£		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRE	CTORS	IN 12
TITLE	DC	☐ DELETE	1.1 10	TL€			☐ CI	ange	Addition
NAME	SCHWAN, ALFRED P		1.2 N	AME					
STREET ADDRESS	115 W COLLEGE DR		1.3 S	rree1 a	ADDRESS	1			
CITY-ST-ZIP	MARSHALL MN 58258		1.4 CI	ITY-\$1	- 21P				
TITLE	CEO DELETE 21		2 1 TI	ILE			☐ Cr	ange	Addition
NAME	<b>S</b> CHWAN, ALFRED P		2.2 N						
STREET ADDRESS	115 W COLLEGE DR		2 3 S1	HEET A	ADDRESS				
CITY-ST-ZIP	Marshall MN 56258			ITY-SI					
TITLE	DVT	<b>₩</b> DELETE	3 1 71		1 211	Vice President \ Treasurer, Direc	tor I co	ange	Addition
NAME	ANDERSON, ADRIAN J		3.2 N/			Herrmann, Dan		ango .	Pag Modifican
STREET ADDRESS	115 W COLLEGE DR				ADDRESS	115 West College Drive			
CITY-ST-ZIP	MARSHALL MN 58258					marshall, mn. 56258			İ
TITLE	DS	DELETE	3.4. C 4.1 TC	ITY-SI	1-114	THE SHOOT HITE SHOULD	Ch	ange [	Addition
NAME	MILLER, DONALD	ottell					[] (n	ange [	AUUIIIUII
	115 W COLLEGE DR		4.2 N						İ
STREET ADDRESS	MARSHALL MN 56258				UDRESS				
CITY-ST-ZIP	794	DELETE		TY-ST	- 7IP				
TITLE	MILLER, DONALD	☐ DELET <b>e</b>	5.1 Trī				☐ Ch	ange [	Addition
NAME	115 W COLLEGE DR		5.2 NA						
STREET ADDRESS			5.3 ST	REE1 A	DDRESS				1
CITY-ST-ZIP	MARSHALL MN 56258		5 4 CI		- ZIP			····	
TITLE	PCOO	DELETE	6.1 TIT	LE			☐ Ch	inge [	Addition
NAME	NOYES, KENNETH H		6.2 NA	ME					
STREET ADDRESS	115 W COLLEGE DR		63 ST	AEET A	DDRESS				
CITY-ST-ZIP	MARSHALL MN 56258		6.4 CI	TY-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 logal effect as if made under eath; 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 of chapter 607, or on an attachment with an address.