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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G67056

SANDERS FOOD SERVICES, INC.

FILED Jan 21, 1999 8:00am Secretary of State

01-21-1999 90014 018 ***150.00

Principal Place of Business Mailing Address										
328 W BEACH	DRIVE	328 W BEACH DRIVE								
PO DRAWER 10		PO DRAWER 1030				-0.40T MD1T	- 41 - 110 0			
PANAMA CITY FL 32401-2716		PANAMA CITY FL 32402-1030			DO NOT WRITE IN THIS SPACE					
US	•	U\$				3. Date Incorporated or Qualifed				
						10/28/1983		,		
2. Principal Pl	lace of Business	2a. Mailing Add	ress			4. FEI Number			Applied For	
21		26				59-2358211		N.	Not Applica	ble
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional				
22		27				5. Certificate of Status Desired	ш	Fee	Required	
City & State	e	City & State				6. Election Campaign Financing		\$5.0	0 May Be	
23		28				Trust Fund Contribution			d to Fees	
Zip	Country	Zip Country				8. This corporation owes the current	nt vear Intar	naible		
— ·	_ `		29 30			Personal Property Tax.				
24	9. Name and Address of Current					10. Name and Address of New Re				
	9. Name and Address of Current	Registered Agent		81	Name	10. Nume and Paul Coo of Non-No	giotorou i i			
CANI	DEDC LI DENNIV	•		"	1401110					
SANDERS, H. DENNY				82	Street Address (P.O. Box Number is Not Acceptable)					
	W BEACH DRIVE		2							
PAN	AMA CITY FL 32401			83						İ
				84	City		***	85 Z	ip Code	*
				04	City	•	FL	63 2	ip Code	
11 Pursuant	to the provisions of Sections 607 0502	and 607.1508. Flor	rida Statutes. t	the above	e-named o	corporation submits this statement for the p	urpose of c	hanging	its registere	ed
office or r	egistered agent, or both, in the State o	i Fiorida. Such chai	nge was autho	orized by	tne corpo	ration's board of directors. I hereby accept	the appoint	ment as	registered	
agent: I a	m familiar with, and accept the obligation	ons of, Section 607	.0505, Flonda	Statutes	١.					
SIGNATURE	1884 19 1 BARRATA	-15					DATE			
	Signature, typed or printed name of registered agent		(NOTE: Reg		nt signature re	quired when reinstating) ADDITIONS/CHANGES TO OFF		DIPEC	TOPS IN 1	
12.	OFFICERS AND		DELETE	13.		ADDITIONS/CHANGES TO OTT		F1 Chang		
TITLE	PST	U .	JELE 1E	1.1 TITLE					, <u>, , , , , , , , , , , , , , , , , , </u>	
NAME	SANDERS, HARRY			1.2 NAME						
STREET ADDRESS	328 W BEACH DR			1.3 STREET	TADDRESS					
CITY-ST-ZIP	Panama City Fl			1.4 CITY-S	T-ZIP					
TITLE .	V		DELETE	2.1 TITLE	•			☐ Chang	ge □Ado	dition
NAME	SANDERS, H. DENNY			2.2 NAME						ļ
STREET ADDRESS	328 W BEACH DR			2.3 STREET	TADDRESS					1
	PANAMA CITY FL			2. 4 CITY-S					1	
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NAME				3.2 NAME						
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NAME				4. 2 NAME						
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				4.4 CITY-S	1					
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NAME					T 4D00E00					
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CITY-ST-ZIP	*,	·		5.4 CITY-S	T-ZIP					
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NAME			Į.	6.2 NAME						
STREET ADDRESS	• •			6.3 STREE	TADDRESS					
CITY ST. 7ID				6.4 CITY-S						
C11V. ST. //D										

14. I hereby certify that the information supplied with his filing does not gualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementar 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 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 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 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 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 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 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 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 of the 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 of the 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 of the 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 of the corporation of the accurate and that my signature shall have the same legal effect as if made under oath; that I am an oath of the corporation of the corporation of the corpor

SIGNATURE:

OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-99

9507692152 Daytime Phone #