2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # H38894

1. Entity Name
MAC'S MEAT MARKET,INC.

Principal Place of Business	Mailing Address
BOX 899 WINTER HAVEN, FL 33882	1277 1ST ST. S WINTER HAVEN, FL 33880 US

07022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2502148
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHILTON, CHARLES R.
99 SIXTH STREET, S.W.
WINTER HAVEN, FL 33883

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	DAS
NAME	CHILTON, CHARLES R.
STREET ADDRESS	99 SIXTH STREET, S.W.
CITY-ST-ZIP	WINTER HAVEN, FL
TITLE	D
NAME	SATERBO, STEPHEN
STREET ADDRESS	302 PROGRESS RD
CITY-ST-ZIP	AUBURNDALE, FL
TITLE	D
NAME	SATERBO, BRYAN N
STREET ADDRESS	302 PROGRESS RD
CITY-ST-ZIP	AUBURNDALE, FL
TITLE	P
NAME	MCCLELLAND, AUDREY M
STREET ADDRESS	4925 ELAM RD
CITY-ST-ZIP	LAKELAND, FL
TITLE	VP
NAME	ANDERSON, RORI B
STREET ADDRESS	5039 1ST ST SE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	VP
NAME	ELKINS, BEVERLY R
STREET ADDRESS	4300 LAKE HANCOCK RD
CITY-ST-ZIP	LAKELAND, FL 33813

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Audrey M. McClelland Audrey M McClelland 7/2/04 863-299-1444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Pres