FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # PALMETTO MEAT SHOP, INC. Principal Place of Business Mailing Address % ROGER R. TALBOT % ROGER R. TALBOT 1810 10TH ST W 1810 10TH ST W PALMETTO FL 34221 PALMETTO FL 34221 3. Date Incorporated or Qualified 3a. Date of Last Report 04/01/1988 03/07/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 <u>65-0043841</u> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 22 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name TALBOT, ROGER R. Street Address (P.O. Box Number is Not Acceptable) 82 1810 10TH ST W PALMETTO FL 34221 83 84 City **B**5 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 Signature, typed or printed name of registered agent and title I applicable. (NOTE: Registered Agent signature required when reinstaring) OFFICERS AND DIRECTORS 12. CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TOTALE DP DELETE 1. 1 TITLE Change Addition NAME TALBOT, ROGER R. 12 NAME STREET ADDRESS 1810 10TH ST W 1.3 STREET ADDRESS CITY - ST - ZIP PALMETTO FL 1.4 CITY - ST- ZIP TITLE DELETE 2. 1 TITLE Change Addition NAME STIVERS, ROBIN 2.2 NAME STREET ADORESS 7802 17TH AVENUE NW 23 STREET ADDRESS CITY - ST - ZIP BRADENTON FL 2 4 CITY-ST-ZIP THLE S DELETE 3. 1 TITLE ☐ Change ■ Addition NAME TALBOT, DAVID 32 NAME STREET ADDRESS 933 BYRON CT. 3.3. STREET ADDRESS CITY - ST - ZIP SARASOTA FL 3.4 CITY - \$1 - ZIP TIFLE AVP DELETE 4. 1 TITLE Change ☐ Addition NAME HILL, NICOLE 4.2 NAME STREET ADDRESS 2421 51ST STREET CT, E. 4.3 STREET ADDRESS CITY-ST-ZIP PALMETTO FL 44 CITY-ST-ZIP TITLE AS. DELETE 5 1 TITLE ☐ Change Addition NAME CORIGLIANO, AUDREY 5.2 NAME STREET ADDRESS 3000 GULF DR., APT 4 5.3 STREET ADDRESS CITY - \$1 - 2IP HOLMES BEACH FL 5 4 CITY - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition NAME TALBOT, CLAUDETTE C. 6.2 NAME 7619-2ND AVENUE, WEST STREET ADDRESS 6.3 STREET ADDRESS **BRADENTON FL** CITY-S1-2IP 64 CITY-ST-ZIP 14. I do horeby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

OFFICER OR DIRECTOR