

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

FILED

Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K97500 (8)
 1. Corporation Name
HOMETOWN FOOD STORES, INC.

Principal Place of Business % MARK I. MCLIN 1201 WEST HIGHWAY 50 CLERMONT FL 34711	Mailing Address % MARK I. MCLIN 1201 WEST HIGHWAY 50 CLERMONT FL 34711
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/20/1989	
4. FEI Number 59-2969997		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent MCLIN, MARK I. 538 MATILDA PLACE LONGWOOD FL 32750				10. Name and Address of New Registered Agent 81 Name MCLIN, MARK I. 82 Street Address (P.O. Box Number is Not Acceptable) 1967 Brantley Circle 83 CLERMONT FL 34711 84 City FL 85 Zip Code 34711			
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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, to 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **4-8-98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCLIN, MARK I.			1.2 NAME	MCLIN, MARK I.		
STREET ADDRESS	1910 BRANTLEY CIRCLE			1.3 STREET ADDRESS	1967 BRANTLEY CIRCLE		
CITY-ST-ZIP	CLERMONT FL			1.4 CITY-ST-ZIP	CLERMONT FL. 34711		
TITLE	V	<input type="checkbox"/> DELETE		2.1 TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCLIN, PAMELA A.			2.2 NAME	MCLIN, PAMELA A.		
STREET ADDRESS	1910 BRANTLEY CIRCLE			2.3 STREET ADDRESS	1967 BRANTLEY CIRCLE		
CITY-ST-ZIP	CLERMONT FL			2.4 CITY-ST-ZIP	CLERMONT FL. 34711		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

CR2E034 (10/97)