

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 20 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L69990

(4)

1. Corporation Name

GREAT WESTERN FOODS, INC.

Principal Place of Business

**%PAMELA J RUSH
3321 HENDERSON BLVD.
TAMPA FL 33609**

Mailing Address

**%PAMELA J RUSH
3321 HENDERSON BLVD.
TAMPA FL 33609**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/30/1990

3a. Date of Last Report
04/25/1994

4. FEI Number
59-3007852

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 194.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 **4450 E. Adamo Drive**

2a. Mailing Address

26 **4450 E. Adamo Drive**

Suite, Apt. #, etc.

22 **501**

Suite, Apt. #, etc.

27 **501**

City & State

23 **Tampa, FL 33605**

City & State

28 **Tampa, FL 33605**

Zip

24 **USA**

Zip

29 **USA**

9. Name and Address of Current Registered Agent

**RUSH, PAMELA J
3321 HENDERSON BLVD.--
TAMPA FL 33602**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

777 S. Harbour Island Blvd., Suite 270

83

84 City

Tampa

FL

85 Zip Code
33602

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Pamela J. Rush**

Signature, typed or printed name of registered agent and title if applicable

Pamela J. Rush
(NOTE: Registered Agent's signature required when reinstating)

DATE **1-13-95**

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUSH, PAMELA J
STREET ADDRESS	3321 HENDERSON BLVD.
CITY-ST-ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	777 S. Harbour Island Blvd., Suite 270
1.4 CITY-ST-ZIP	Tampa, FL 33602
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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JAN 13 1995

CORP. OFFICE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *Pamela J. Rush*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela J. Rush

1-13-95

813/247-7116

Date

Telephone Number