FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
Apr 15 1997 8:00am
Secretary of State

DOCUMENT # **P23505** **(1)**

1. Corporation Name
OTIS SPUNKMEYER, INC.

Principal Place of Business
14390 CATALINA STREET
SAN LEANDRO CA 94577

Mailing Address
14390 CATALINA STREET
SAN LEANDRO CA 94577-5552

3. Date Incorporated or Qualified: 03/21/1989
3a. Date of Last Report: 01/30/1996

2. Principal Place of Business — 21: ABOVE
2a. Mailing Address — 26: ABOVE
22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc
23 City & State
28 City & State
24 Zip — 25 Country
29 Zip — 30 Country

4. FEI Number: 94-2536513 — 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
CASTINE, BARBARA
7548 CURRENCY DRIVE
ORLANDO FL 32809

10. Name and Address of New Registered Agent
81 Name: N/A
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL — 85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	RAWLINGS, LINDA	
STREET ADDRESS	412 SCENIC AVE.	
CITY-ST-ZIP	PIEDMONT CA	
TITLE	CD	☐ DELETE
NAME	RAWLINGS, KENNETH	
STREET ADDRESS	412 SCENIC AVE.	
CITY-ST-ZIP	PIEDMONT CA	
TITLE	S	☐ DELETE
NAME	RICKS, STEVE	
STREET ADDRESS	14490 CATALINA STREET	
CITY-ST-ZIP	SAN LEANDRO CA	
TITLE	CEO	☐ DELETE
NAME	MORLOCK, STEVE	
STREET ADDRESS	14490 CATALINA STREET	
CITY-ST-ZIP	SAN LEANDRO CA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
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		
1.4 CITY-ST-ZIP		
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	14490 CATALINA ST	
2.4 CITY-ST-ZIP	SAN LEANDRO, CA 94577	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	CFO	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	PRESIDENT	☐ Change ☒ Addition
5.2 NAME	JOHN SCHIAVO	
5.3 STREET ADDRESS	14490 CATALINA ST	
5.4 CITY-ST-ZIP	SAN LEANDRO, CA 94577	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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: [illegible] Secretary 3/31/97 510-357-9836