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

DOCUMENT # **P38955** **(1)**

FILED
95 JAN 27 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
SYSCO FOOD SERVICES - JACKSONVILLE, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
1501 LEWIS INDUSTRIAL DRIVE JACKSONVILLE FL 32205	1501 LEWIS INDUSTRIAL DRIVE JACKSONVILLE FL 32205

3. Date Incorporated or Qualified: 05/26/1992
3a. Date of Last Report: 01/19/1994

2. Principal Place of Business (21)
2a. Mailing Address (26): P O BOX 37045
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28): JACKSONVILLE, FL
Zip (24) / Country (25)
Zip (29): 32236-7045 / Country (30): USA

4. FEI Number: 59-3120994 ☐ 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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	AS	☐ Change ☒ Addition
NAME	FAIRCLOTH, GERALD	1.2 NAME	KURZ, THOMAS	
STREET ADDRESS	1501 LEWIS INDUSTRIAL DR	1.3 STREET ADDRESS	20010 SKY HOLLOW LANE	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	KATY, TX 8845-	
TITLE	EVPD	2.1 TITLE	V.P.TERR.SALES	☐ Change ☒ Addition
NAME	RUDISILER, WALTER R.	2.2 NAME	RUSSELL, JOSEPH	
STREET ADDRESS	1501 LEWIS INDUSTRIAL DR	2.3 STREET ADDRESS	4974 WILD HERON WAY	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32225	
TITLE	~~XXXVTS~~	3.1 TITLE	VTS	☒ Change ☐ Addition
NAME	REED, TIMOTHY R.	3.2 NAME	REED, TIMOTHY R.	
STREET ADDRESS	1501 LEWIS INDUSTRIAL DR	3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP		
TITLE	V	4.1 TITLE	AT	☐ Change ☒ Addition
NAME	CARANTZA, PETER C.	4.2 NAME	DAY, DIANE S.	
STREET ADDRESS	1501 LEWIS INDUSTRIAL DR	4.3 STREET ADDRESS	3518 VINEYARD	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	HOUSTON, TX 777082	
TITLE	VD	5.1 TITLE	AS	☐ Change ☒ Addition
NAME	RIKER, LA DEE G.	5.2 NAME	BROOKS, CONNIE S.	
STREET ADDRESS	1390 ENCLAVE PARKWAY	5.3 STREET ADDRESS	3906 BRATTON ST	
CITY-ST-ZIP	HOUSTON TX	5.4 CITY-ST-ZIP	SUGAR LAND, TX 77479	
TITLE	V	6.1 TITLE		☐ Change ☐ Addition
NAME	JONES, DONALD W.	6.2 NAME		
STREET ADDRESS	1501 LEWIS INDUSTRIAL DR	6.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP		

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 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: Timothy R. Reed TIMOTHY R. REED 1/23/95 904/786-2600
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL WHO SIGNED Date Daytime Telephone #

0020763 CP