

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

**95 APR 19 PM 4:06**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # P39288 (6)**  
1. Corporation Name  
**CENTRAL GARDEN & PET COMPANY**

Principal Place of Business      Mailing Address  
**3620 HAPPY VALLEY ROAD      P.O. BOX 65660  
LAFAYETTE CA 95549      DALLAS TX 75265-0660**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**06/17/1992      04/29/1994**

4. FEI Number      Applied For  
**68-0275553      Not Applicable**

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Election Campaign Financing       \$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address

21 Suite, Apt. #, etc.      26 Suite, Apt. #, etc.

22 City & State      27 City & State

23 Zip      Country      28 Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

01 Name

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

03

04 City      FL      05 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 registering)      DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	NOVOTNY, GLENN W.
STREET ADDRESS	3620 HAPPY VALLEY ROAD
CITY-ST-ZIP	LAFAYETTE CA
TITLE	V
NAME	HINES, NEILL J.
STREET ADDRESS	3620 HAPPY VALLEY ROAD
CITY-ST-ZIP	LAFAYETTE CA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

*see attached*

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(2)(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 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: *Neil J. Hines*      4/12/95      (214) 358-4241  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Telephone #  
**Neil J. Hines**

P39288

**CENTRAL GARDEN AND PET - OFFICERS/DIRECTOR**  
3697 Mt. Diablo Blvd. Suite 310  
Lafayette, CA 94549  
Federal ID# 68-0275553

<b>NAME</b>	<b>TITLE</b>	<b>SSN</b>	
William E. Brown	Chariman & C.E.O.	563-56-2295	Officer & Director
✓ Glenn W. Novotny	President and Chief Operating Officer	544-48-2268	Officer & Director
Robert B. Jones	V.P. Finance, Chief Financial Officer and Secretary	067-26-1544	Officer
Lee D. Hines, Jr.		145-36-7759	Director
✓ Neil J. Hines	Executive VP and Asst. Secretary	244-56-3997	Officer
Daniel P. Hogan, Jr.			Director