

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
FILED**
65 MAY 16 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000007084 (5)

1. Corporation Name

HAPPY JACK GROCERY & MARKET, INC.

Principal Place of Business

**1454 N. MYRTLE AVE.
JACKSONVILLE FL 32208**

Mailing Address

**1454 N. MYRTLE AVE.
JACKSONVILLE FL 32208**

(PRINT OR WRITE IN THIS SPACE)

2. Date first incorporated (or re-incorporated) **01/25/1993**
3a. Date of Last Report **06/15/1994**

4. FEI Number **59-3166709**
Applied for ☐
Not Applied for ☐

5. Certificate of Status (Required) ☐ **\$8.75 Additional Fee Required**

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

8. This corporation is subject to reorganization under 15-109(1)(b) Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

State Agent's Office

State Agent's Office

22

27

City, State

City, State

23

28

City, State

City, State

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ISAAC, FRED C
2468 ATLANTIC BLVD.
JACKSONVILLE FL 32207**

81. Name

82. Street Address (P.O. Box required for Non-Acceptable)

83

84. City

FL

85. Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized for the purpose of carrying on the business of a corporation as provided in the laws of the State of Florida, and that the corporation is subject to the laws of the State of Florida, and that the corporation is subject to the laws of the State of Florida, and that the corporation is subject to the laws of the State of Florida.

Signature

12. Name and Address of Registered Agent

13. Name and Address of New Registered Agent

14. Name

**D
COBB, DANIEL JR.
4923 PORTSMOUTH ST.
JACKSONVILLE FL 32208**

15. Name

**D
FANN, BERNIE M
5004 PRINCELY AVE.
JACKSONVILLE FL 32208**

16. Name

17. Name

18. Name

19. Name

20. Name

21. Name

22. Name

23. Name

24. Name

25. Name

26. Name

27. Name

28. Name

29. Name

30. Name

31. Name

32. Name

33. Name

34. Name

35. Name

36. Name

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIVISION

5/15/95