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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000032897 (9)

1. Corporation Name
STAFFORD FOODS OF FLORIDA, INC.

Principal Place of Business

1-75 & U.S. 82
TIFTON GA 31794

Mailing Address

P.O. BOX 1267
TIFTON GA 31793-1267



2. Principal Place of Business

21 1805 U.S. Hwy 82 West
Suite, Apt. #, etc.

22 City & State

23 Tifton, Georgia

24 Zip 31794

Country

25 U.S.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29 U.S.

30 Country

3. Date Incorporated or Qualified

05/05/1993

3a. Date of Last Report

04/26/1996

4. FEI Number

58-2046754

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

WALKER, ADON H
802 11TH STREET WEST
BRADENTON FL 34205

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME STAFFORD, D.N.
STREET ADDRESS FULWOOD BLVD.
CITY-ST-ZIP TIFTON GA

TITLE V ☐ DELETE

NAME STAFFORD, DE NEAN 1
STREET ADDRESS 2010 EMORY DRIVE
CITY-ST-ZIP TIFTON GA

TITLE ~~XX~~ DELETE

NAME WHITE, RANDALL
STREET ADDRESS 819 PRINCE AVENUE
CITY-ST-ZIP TIFTON GA

TITLE S ☐ DELETE

NAME ARNOLD, JR. W
STREET ADDRESS RT. 1, BOX 1955
CITY-ST-ZIP CHULA GA

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

V ☒ Change ☐ Addition

Stafford, DeNean, III
2010 Emory Drive
Tifton, GA 31794

T ☐ Change ☒ Addition

Frank J. Jones, Jr.
49 Pearman Road
Chula, GA 31733

S ☒ Change ☐ Addition

Arnold, W. H., Jr.
207 Adams Road
Chula, GA 31733

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

[Signature]

11/11/97

(912) 391-0552

CR2E034 (9/96)