

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2002 8:00 am**  
**Secretary of State**

04-18-2002 90374 029 \*\*\*150.00

**DOCUMENT # P93000057635**

1. Entity Name

**FLEMING SUPERMARKETS OF FLORIDA, INC.**

Principal Place of Business

**6525 N MERIDIAN  
 OKLAHOMA CITY OK 73116  
 US**

Mailing Address

**6525 N MERIDIAN  
 OKLAHOMA CITY OK 73116  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**6525 N Meridian**

3. Mailing Address

**6525 N Meridian**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**OKLAHOMA CITY OK**

City & State

**OKLAHOMA CITY OK**

Zip

**73116**

Country

**USA OK**

Zip

**73116**

Country

**USA OK**

4. FEI Number

**65-0418543**

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND RD.  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>LEHTO, STEVEN A.</b>	
STREET ADDRESS	<b>6952 NW 5TH WAY</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	<b>VC</b>	<input type="checkbox"/> Delete
NAME	<b>MOORE, LOUIS F.</b>	
STREET ADDRESS	<b>6952 NW 5TH WAY</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL</b>	
TITLE	<b>VPS</b>	<input type="checkbox"/> Delete
NAME	<b>GRAHAM, LENORE T</b>	
STREET ADDRESS	<b>6301 WATERFORD BLVD</b>	
CITY-ST-ZIP	<b>OKLAHOMA CITY OK 73118</b>	
TITLE	<b>V</b>	<input type="checkbox"/> Delete
NAME	<b>SMITH, ROBERT</b>	
STREET ADDRESS	<b>6301 WATERFORD BLVD</b>	
CITY-ST-ZIP	<b>OKLAHOMA CITY OK</b>	
TITLE	<b>V</b>	<input type="checkbox"/> Delete
NAME	<b>QUINN, PAUL J</b>	
STREET ADDRESS	<b>6301 WATERFORD BLVD</b>	
CITY-ST-ZIP	<b>OKLAHOMA CITY OK</b>	
TITLE	<b>V FAS</b>	<input type="checkbox"/> Delete
NAME	<b>THOMPSON, JOHN M</b>	
STREET ADDRESS	<b>6301 WATERFORD BLVD</b>	
CITY-ST-ZIP	<b>OKLAHOMA CITY OK</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Scott Nickelson</b>	
STREET ADDRESS	<b>3400 NW 74</b>	
CITY-ST-ZIP	<b>Miami FL 33122</b>	
TITLE	<b>UPIC</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Louis F Moore</b>	
STREET ADDRESS	<b>3400 NW 74</b>	
CITY-ST-ZIP	<b>Miami FL 33122</b>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Carlos M. Hernandez</b>	
STREET ADDRESS	<b>1945 Lakepointe Dr</b>	
CITY-ST-ZIP	<b>Lewisville TX 75057</b>	
TITLE	<b>UPTAS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Mark D. Shapiro</b>	
STREET ADDRESS	<b>1945 Lakepointe Dr</b>	
CITY-ST-ZIP	<b>Lewisville TX 75057</b>	
TITLE	<b>U</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>William C. Mee</b>	
STREET ADDRESS	<b>1945 Lakepointe Dr.</b>	
CITY-ST-ZIP	<b>Lewisville TX 75057</b>	
TITLE	<b>AS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Mark O. Neumeister</b>	
STREET ADDRESS	<b>6525 N Meridian</b>	
CITY-ST-ZIP	<b>OKLA City OK 73116</b>	

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Mark O. Neumeister** **Mark O. Neumeister** **4-2-02** **405 840 7200**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

*attachment # P9300005765*  
**FLEMING SUPERMARKETS OF FLORIDA**  
List of Corporation Officers and Directors

*634821*

**OFFICER:**

**ADDRESS:**

Scott Nicholson  
President

3400 NW 74<sup>th</sup> Ave  
Miami, Fl 33122

Carlos M. Hernandez  
Vice President - Secretary

1945 Lakepointe Drive  
Lewisville, Tx 75057

Louis F. Moore, Jr.  
Vice President - Controller

3400 NW 74<sup>th</sup> Ave  
Miami, Fl 33122

Mark D. Shapiro  
Vice President - Treasurer &  
Assistant Secretary

1945 Lakepointe Drive  
Lewisville, Tx 75057

William C. Mee  
Vice President

5701 N. Shartel  
Oklahoma City, Ok 73118

Kirsten E. Richesson  
Assistant Secretary

1945 Lakepointe Dr.  
Lewisville, Tx 75057

Mark O. Neumeister  
Assistant Secretary

6525 N. Meridian Ave  
Oklahoma City, Ok 73116

**DIRECTORS:**

Neal J. Rider

1945 Lakepointe Drive  
Lewisville, Tx 75057

Carlos M. Hernández

1945 Lakepointe Drive  
Lewisville, Tx 7505

Mark D. Shapiro

1945 Lakepointe Drive  
Lewisville, Tx 75057