

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90033 014 ***150.00

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DOCUMENT # **P93000071410**

1. Entity Name

~~OSHAWA GROUP PRODUCE INC.~~
SOBEYS PRODUCE INC.

N/C AM

Principal Place of Business

**WOOLBRIGHT CORPORATE CENTER
 1903 S CONGRESS AVE., S-300
 BOYNTON BCH. FL 33426
 US**

Mailing Address

**WOOLBRIGHT CORPORATE CENTER
 1903 S CONGRESS AVE., S-300
 BOYNTON BCH. FL 33426
 US**

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0441887**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HODSGON, RUSS, ANDREWS, WOODS & GOODYEAR
 2000 GLADES RD
 STE 400
 BOCA RATON FL 33431**

Name

HODGSON RUSS

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

1801 NORTH MILITARY TRAIL, SUITE 200

City

BOCA RATON FL

FL

Zip Code
33434

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **C** ☐ Delete
 NAME **MCEWAN, WILLIAM**
 STREET ADDRESS **39 BELL ST**
 CITY-ST-ZIP **NEW GLASGOW, NOVA SCOTIA**

TITLE **D/P & CEO** ☒ Change ☐ Addition
 NAME **MCEWAN, WILLIAM**
 STREET ADDRESS **39 Bell St.**
 CITY-ST-ZIP **NEW GLASGOW, NS B2H 2A8**

TITLE **D** ☐ Delete
 NAME **DUTTON, ANTHONY**
 STREET ADDRESS **200 GLADES RD STE-400**
 CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☒ Delete
 NAME **ROWE, ALLAN**
 STREET ADDRESS **312 FORBES STREET**
 CITY-ST-ZIP **NEW GLASGOW, NOVA SCOTIA**

TITLE **D/ Executive Vice President & CEO** ☐ Change ☒ Addition
 NAME **HYNES, GLENN**
 STREET ADDRESS **216 BLUE HERON DRIVE**
 CITY-ST-ZIP **NEW GLASGOW, NS B2H 5S5**

TITLE **S** ☒ Delete
 NAME **EWERT, DARRELL**
 STREET ADDRESS **104 MARTIN ST**
 CITY-ST-ZIP **KING CITY ON**

TITLE **D/S Executive Vice President Corporate** ☐ Change ☒ Addition
 NAME **James Dickson**
 STREET ADDRESS **32 St. Laurent Place**
 CITY-ST-ZIP **Halifax, NS B3M 4B8**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Change ☒ Addition
 NAME **KEAY, CLINTON**
 STREET ADDRESS **29 SIERRA DRIVE**
 CITY-ST-ZIP **NEW GLASGOW, NS B2H 5T3**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **Assistant Secretary** ☐ Change ☒ Addition
 NAME **McDow, Jane**
 STREET ADDRESS **48 St. Bernard St.**
 CITY-ST-ZIP **New Glasgow, NS B2H 5U4**

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:

Jane McDow
JANE McDOW
 Assistant Secretary

March 19, 2002

902-752-8371

Date

Daytime Phone # **202 2020**

CR2E034 (9/01)