

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY - 1 AM 10:15

DOCUMENT # **P94000020100 (1)**

1. Corporation Name
QUALITY WHOLESALE FOODS OF SOUTHWEST FLORIDA, IN C.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
368 INDUSTRIAL BLVD. NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/15/1994		3a. Date of Last Report	
4. FEI Number 65-0474317		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address	
21	26		
22 Suite, Apt #, etc.		27 Suite, Apt #, etc.	
23 City & State		28 City & State	
24 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent GASPAR, TOBEY L 368 INDUSTRIAL BLVD. NAPLES FL 33942		10. Name and Address of New Registered Agent	
B1 Name		B5 Zip Code	
B2 Street Address (P.O. Box Number is Not Acceptable)			
B3			
B4 City			

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: Tobey L. Gaspar President **Tobey L. Gaspar** PRESIDENT
DATE: **4-25-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWE, HERBERT	1.2 NAME	
STREET ADDRESS	368 INDUSTRIAL BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 33942	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GASPAR, TOBEY L	2.2 NAME	
STREET ADDRESS	368 INDUSTRIAL BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 33942	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELMS, HENRY J	3.2 NAME	
STREET ADDRESS	368 INDUSTRIAL BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 33942	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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(3)(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 of changed, or on an attachment with an address.

SIGNATURE: Tobey L. Gaspar President **Tobey L. Gaspar** PRESIDENT
DATE: **4-25-95**