## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P940002
COUNTRY CORNER FOOD STORE, INC. P94000021082 (0)

## **FILED** Feb 11 1998 8:00am Secretary of State

					<u> </u>
Principal Place of Business Mailing Address 1312 LEWIS TURNER BOULEVARD 1312 LEWIS TURNER B					<u>man 11011 gangt natur 1484 tabi</u>
FT. WALTON BEACH FL 32547		FT. WALTON BEACH FL 32	547	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 03/14/1994	
2. Principa	If Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26		26		59-3230231	Not Applicable
Suite, Apt. #, etc 27		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
[ Zip	Country	Zip	Country	B. This corporation owes or has paid the c	
24	25	29 3	0	Personal Property Tax due June 30.	Yes □ No □
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STUFCKEN LARRY D P A 81 Name					
	STUECKEN, LARRY D P.A. 310 BEACH DRIVE		Name		
DESTIN FL 32541			82 Street Add	iress (P.O. Box Number is Not Acceptable)	
·	DESTRIT FE SECTI		83		
1			84 City	Fi	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 registerest ugent and little if applicable (NOTE			Rogistered Apant signature requ		
12.	OFFIC	FRS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12  Change Addition
TITLE	ABRAHAMSEN, DIANA	SLIF.	1.1 TITLE		I INDITION I SQUERICI [
STREET ADDRESS 1344 BLUEBERRY LANE			1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP FORT WALTON BEACH FL 32547			1.4 CITY-ST-ZIP		]
TITLE		DELETE	21 TIFLE		☐ Change ☐ Addition
NAME			2 2 NAME		_ ,
STREET ADDRES	ss		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		İ
STREET ADORE	ss		3.3 STREET ADDRESS		}
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NAME			4. 2 NAME		ļ
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TITLE		☐ D£LETE	5.1 TITLE		Change Addition
NAME	. [		5.2 NAME		
STREET ADORES	»		5.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME			6 1 TITLE 6 2 NAME	÷.	
l	ec				
STREET ADDRES	» [		6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		
14. I heret	y certify that the information sur	pplied with this filing does not qualify for		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 this 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: DIANA SUE Abrahamsen