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FILED  
May 09 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 # P94000058532 (0)

1. Corporation Name

SNACK DISTRIBUTORS NETWORK, INC.



Principal Place of Business

Mailing Address

2052 FORSYTHE ROAD  
WINTER PARK FL 32782

2052 FORSYTHE ROAD  
WINTER PARK FL 32782-6680

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

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29

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9. Name and Address of Current Registered Agent

SOBERING, GRAY & WHITE, P.A.  
201 S. ORANGE AVE.  
STE. 700  
ORLANDO FL 32801

3. Date Incorporated or Qualified

08/08/1994

3a. Date of Last Report

03/12/1996

4. FEI Number

62-1575914

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

10. Name and Address of New Registered Agent

81 Name

Dwayne Gray

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

133 W. Central Blvd.

83

Suite 1100

84

City Orlando FL

FL

85

Zip Code

32801

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

*Dwayne Gray*

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

4/30/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PUCINELLI, TONY  
STREET ADDRESS 607 LICKING HOLE ROAD  
CITY-ST-ZIP ASHLAND VA 23005

TITLE ☐ DELETE

NAME BYER, ANDY  
STREET ADDRESS 6916 VALJEAN AVENUE  
CITY-ST-ZIP VAN NUYS CA 90406

TITLE ☐ DELETE

NAME LAUNER, RICHARD  
STREET ADDRESS 2052 FORSYTHE ROAD  
CITY-ST-ZIP WINTER PARK FL 32782

TITLE ☐ DELETE

NAME CLEMENS, TIM  
STREET ADDRESS RELIANCE & WILE AVENUE  
CITY-ST-ZIP SOUNDERTON PA 18984

TITLE ☐ DELETE

NAME ROCKHILL, PETE  
STREET ADDRESS 1617 HENDRICKS AVE.  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ DELETE

NAME LAUNER, RICHARD  
STREET ADDRESS 2052 FORSYTHE ROAD  
CITY-ST-ZIP WINTER PARK FL 32782

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

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

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Change

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Addition

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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

*Dwayne Gray*

2-25-97

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CR2E034 (9/96)