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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000072983 (5)

THE VILLAGE GOURMET, INC.

\$16 BREVARD AVE 316 BREVARD AVE **COCOA FL 32922 COCOA FL 32922** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3399181 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XNo Zip Country 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Bi Name BOULWARE, SUSAN H 439 ISLAND BEACH BLVD 82 Street Address (P.O. Box Number is Not Acceptable) MERRITT ISLAND FL 32952 83 84 City 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, typod or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition TITLE DPT 1.1 TITLE Change NAME **BOULWARE, SUSAN H** 1.2 NAME 439 ISLAND BEACH BLVD 1.3 STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL CITY - ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE PANCAKE, JAN NAME 2.2 NAME STREET ADDRESS 3420 BETH LANE 2.3 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 2. 4 CITY-S1-ZIP ☐ Change DELETE Addition TITLE 31 TITLE EBERT, BARRY A NAME 3.2 NAME STREET ADDRESS 439 ISLAND BEACH BLVD 3.3 STREET ADDRESS MERRITT LSLAND FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ Change DELETE Addition 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME

14. 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 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY - ST - ZIP

61 TITLE

62 NAME

DELETE

1/07/98

457-636-5480

■ Addition

FILED

Feb 02 1998 8:00am

Secretary of State

R2E034 (10/97)