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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000040524 (5)

SUNFLOWER WHOLE FOODS, INC.

FILED Apr 24 1998 8:00am Secretary of State

Principal Place	e of Business	Mading Address		
	IL ROOST TRAIL EY FL 33043	30383 QUAIL ROO BIG PINE KEY FL		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 05/05/1997
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number Applied For Not Applicable
Suite, Apt.	#, etc.	Suite Apt #, etc		5. Certificate of Status Desired
City & State	0	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Gountry 25	Ζ _(p)	Country 30	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr			10. Name and Address of New Registered Agent
S	MITH, LISA F		81 Name	
	0383 QUAIL ROOST TRAIL IG PINE KEY FL 33043		82 Stree	t Address (P.O. Box Number is Not Acceptable)
	O FME NET FE 33043		83	
			84 City	FL 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 Horida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.				
SIGNATURE	Signature: Typicid or printed trumor of tegrole sold	epert and steed appearable	(NOTE Registered Agent signals	re-required when relessating) DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 THUE	PRESIDENT Change & Addition
NAME			1.2 NAME	KRAIG S. BRUER
STREET ADDRESS			1.3 STREET ADDRESS	[476.77.3
CITY-ST-ZIP			1.4 CHY - ST - ZIP	BIG PINE KEY FL 33043
TITLE		DELETE		VICE PRESIDENT Change & Addition
NAME			2.2 NAME	USA F. SMITH
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - 7IP	BIG PINE KEY FL 330 13
TITLE NAME		ב ו התנונ	3.2 NAME	E Chango E Rounion
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4, 0/1Y-S1-ZIP	
TITLE		DELETE		Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELFIE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CiTY+ST-ZIP			5.4 CHY-ST-7IP	
TITLE		DELETE	611111	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I hereby o	certify that the information supplied	with this filing does not qua	lify for the exemption sta Laccurate and that my s	tod in Section 119.07(3)(i), Florida Statutes, I further certify that the information

moneated on this amount open or suppremental annual report is not and accurate and that my signature shall have the same logal effect as if made under oath, that I am a officer or director of the corporation or her recover or trosted 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.

LISA FISAITH