## 4/29/98 B - 5836 - C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMÊNT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000084250 (4)

WATSON DISTRIBUTING CO.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
			_		#32		
2120 CORPORATE SQ. BLVD. #23 JACKSONVILLE FL 32216				2120 CORPORATE SQ. BLVD. #23 JACKSONVILLE FL 32218			
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 09/29/1997
2.	2. Principal Place of Business 2a. Ma			Mailing Address			4. FEI Number 3470104 Applied For Not Applicable
21			26				39-39/0107 Not Applicable
Suite, Apt. #, etc.			Suite,	Suite, Apt. #. etc.			E Certificate of Status Desired 56.75 Additional
22			27	· · · · · · · · · · · · · · · · · · ·			Fee Required
_	City & State	City &	City & State			6. Election Campaign Financing \$5.00 May Be	
23		T. T	28				Trust Fund Contribution Added to Fees
-	Zip	Country	Zφ	ļ	Country		This corporation owes or has paid the current year Intangible
24		25	[29]	30			Personal Property Tax due June 30. X Yes No
Name and Address of Current Registered Agent					B1	Mai	10. Name and Address of New Registered Agent Name
	WATSON, RO				"	140	Name
		PRATE SQ. BLVI	). <b>#</b> 23			Stre	Street Address (P.O. Box Number is Not Acceptable)
	JACKSONVIL	LE FL 32216					
					83		•
		•			84	City	City 85 Zip Code
							FL
11	Pursuant to the providence or registered a	sions of Sections 6 gent or both in th	307.0502 and 607.1508 ie State of Florida, Sucl	l, Florida Statutes, t n change was authi	he above orized hy	e-nan	-named corporation submits this statement for the purpose of changing its registered the corporation's board of directors. I hereby accept the appointment as registered
	agent. I am familiar v	vith, and accept th	e obligations of, Section	n 607.0505, Florida	Statutes	3.	· · · · · · · · · · · · · · · · · · ·
SIGNATURE Signature: typic disc productions of trey shared agent and title diagramative (NOTE: Registered Agent signature required when reinstating)  DATE							
12			RS AND DIRECTORS	(1407)1 (18)	13.	iii bigii	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Tri				DELETE	1.1 TITLE		Change Addition
	ME DOLL	ni IATS	iW .		1.2 NAME		
	REET ADDRESS 74/	Pantury !	21.00		1.3 STREET	ANNRE	rubber
	Y-ST-ZIP OWX	dent N.WASS Century	2216		1.4 CITY-S		1
TIT		· /-/	00,0	DELETE	2.1 11TLE	1-211	Change Addition
	ME				2.2 NAME		
	REET ADDRESS				2.3 STREET	ADDDC	NUNDECC .
	Y-ST-ZIP				2.4 CITY - S		1
TIT				DFLETE	3.1 TITLE	51-71F	Change Addition
	ME				3.2 NAME		
	REET ADDRESS				3.3 STREET	₹D√DC	LINDRESS :
					3.4 CITY-S		1
TIT	Y-ST-ZIP			DELETE	4.1 TOLE	11-217	Change Addition
NA.	1				4. 2 NAME		
	REET ADDRESS					ADDEC	KDDECC
					4.3 STREET		
TIT	Y-ST-ZIP			DELETE	4.4 CITY - S 5.1 TITLE	1-211	Change Addition
				- Decemb			Change Addition
NA CT					5.2 NAME	40005	IDDREC
	REET ADDRESS				5.3 STREET		i i
	Y-ST-ZIP			DELETE	5.4 CITY - S	t - ZIP	
TIT	i			T NETE IF	6.1 TITLE		☐ Change ☐ Addition
NA				ŀ	6.2 NAME		
STI	REET ADDRESS				6.3 STREET	ADDRE	ADDRESS
ĊII	Y-\$T-ZIP				6.4 CITY-S	I - ZIP	- ZIP

14. Thereby 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 suppliemental 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 of 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 organ attachment with an address.