

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

FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000106602 (0)**

1. Corporation Name

DICKSON FOODS CORPORATION



Principal Place of Business

**6013 COURTSIDE DR.
BRADENTON FL 34210**

Mailing Address

**6013 COURTSIDE DR.
BRADENTON FL 34210**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/18/1997

2. Principal Place of Business

2a. Mailing Address

21 **3614 57th Avenue Drive**

26 **3614 57th Avenue Drive W.**

4. FEI Number
65-080-5994

Applied For
Not Applicable

Suite, Apt. #, etc.
22 **Bradenton, FL 34210**

27 **Bradenton, 34210 FL.**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State

City & State

23 **Bradenton, FL.**

28 **Bradenton, FL.**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 **34210**

Country
25 **USA**

Zip
29 **34210**

Country
30 **USA**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DICKSON, MICHAEL B
6013 COURTSIDE DR.
BRADENTON FL 34210**

81 Name **ANNA DOLINSKA-MADURA**

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

83 **3614 57th Avenue Drive West**

84 City **BRADENTON**

FL

85 Zip Code
34210

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

Anna Dolinska-Madura
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE
April 07 - 1998

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	DICKSON, MICHAEL B	
STREET ADDRESS	6013 COURTSIDE DR.	
CITY - ST - ZIP	BRADENTON FL 34210	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DOLINSKA-MADURA, ANNA	
STREET ADDRESS	3614 57TH AVE. DR. W	
CITY - ST - ZIP	BRADENTON FL 34210	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	ANDRZEJ MADURA	
1.3 STREET ADDRESS	3614 57th Avenue Drive West	
1.4 CITY - ST - ZIP		

2.1 TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DOLINSKA-MADURA, ANNA	
2.3 STREET ADDRESS	3614 57th Avenue Drive West	
2.4 CITY - ST - ZIP	BRADENTON FL 34210	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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.

SIGNATURE: *Michael B. Dickson* **2-3-98 87451-0090**

CR2E034 (10/97)