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

PROFIT CORPORATION **ANNUAL REPORT**

1998

TITLE

NAME

STREET ADDRESS

Block 12 or Block 13 if



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

May 08 1998 8:00am

Secretary of State

☐ Change

Addition

P9800000264 (5) DOCUMENT #

KELLEY'S FREEPORT FOODS, INC.

Principal Place of Business Mailing Address 1021-E EAST JOHN SIMS PARKWAY 1021-E EAST JOHN SIMS PARKWAY NICEVILLE FL 32578 NICEVILLE FL 32578 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/31/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-34872 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible 24 Yes ☐ No Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KELLEY, CHARLES R JR 81 Name 1021-E EAST JOHN SIMS PARKWAY 82 Street Address (P.O. Box Number is Not Acceptable) **NICEVILLE FL 32578** В3 **B4** Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 farmar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE HAZIL 98 Kruer ired when reinstating) 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ☐ Change Addition KELLEY, CHARLES R JR NAME 1.2 NAME **37 BAY DRIVE SE** STREET ADORESS 1.3 STREET ADDRESS FORT WALTON BEACH FL 32548 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 21 TITLE KELLEY, MICHAEL A NAME 2.2 NAME 338 SUDDUTH CIR STREET ADDRESS 23 STREET ADDRESS FORT WALTON BEACH FL 32548 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME **KELLEY. CHARLES R SR** 3.2 NAME 179 MONAHAN DRIVE STREET ADDRESS 3.3 STREET ADDRESS FORT WALTON BEACH FL 32548 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITL€ ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

hanged, or on an attachment with an address

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this Irling 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