

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000047032

1. Corporation Name

SOUTHERN FOODS AND PRODUCE, INC.

Principal Place of Business

P.O. Box 18506  
3930 HOLLYWOOD AVE. 2800 Delano St.  
PENSACOLA FL 32506  
32523

Mailing Address

P.O. Box 18506  
3930 HOLLYWOOD AVE.  
PENSACOLA FL 32506  
32523

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

P.O. Box 18506

Suite, Apt. #, etc. 2800 Delano St.

City & State Pensacola

Zip FI 32523 Country Esc.

3. New Mailing Office Address, If Applicable

P.O. Box 18506

Suite, Apt. #, etc.

City & State Pensacola FI

Zip 32523 Country Esc.

4. Date Incorporated or Qualified To Do Business in Florida

05/27/1998

5. FEI Number

59-3516734

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	SEARS, JERRY D	6913 SEA BASS CIRCLE	NAVARRE FL 32508
VD	PARR, JEFFREY F	6913 SEA BASS CIRCLE	NAVARRE FL 32508
VD	DAVID T. Clark	3015 Washington Avenue 6913 SEA BASS CIRCLE 2800 Delano St.	PASCAGOULA MS 39367 PENSACOLA, FL 32505
VD	DAVID Branner	6913 SEA BASS CIRCLE 2800 Delano St	PENSACOLA, FL 32505

8. Name and Address of Current Registered Agent

SEARS, JERRY D  
3930 HOLLYWOOD AVE. P.O. Box 18506  
PENSACOLA FL 32506 2800 Delano St.  
32523

9. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City  
State FL Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

JERRY D. SEARS  
REGISTERED AGENT MUST SIGN

Date 10/18/99

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

JERRY D. SEARS, Pres.

Date 10/18/99 850-432-1537  
Daytime Phone #

CR20240 (Rev)