**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**
**AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)**

PROFIT CORPORATION ANNUAL REPORT
**1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S10880** **(0)**

1. Corporation Name
**WEBB FOODS, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 313 RIO PINAR TRL<br>ORMOND BEACH FL 32174 | 313 RIO PINAR TRL<br>ORMOND BEACH FL 32174<br>US |

3. Date Incorporated or Qualified: 10/08/1990
3a. Date of Last Report: 02/07/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26: 1 JOHN ANDERSON DR.
Suite, Apt #, etc. — 22
Suite, Apt #, etc. — 27: #620
City & State — 23
City & State — 28: ORMOND BEACH FLA
Country — 24, 25
Zip — 29: 32176
Country — 30: USA

4. FEI Number: 59-3035168 — Applied For / Not Applicable
5. Certificate of Status Desired — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes — Yes / No

9. Name and Address of Current Registered Agent

SEPS, DONALD J.
1020 VOLUSIA AVENUE
DAYTONA BEACH FL 32120

10. Name and Address of New Registered Agent

81 Name: GILBERT W. NOELL JR.
82 Street Address (P.O. Box Number is Not Acceptable): ONE JOHN ANDERSON DRIVE
83: UNIT 620
84 City: ORMOND BEACH FL 85 Zip Code: 32176

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: Gilbert W. Noell Jr. — 7-8-96
Signature, type or print name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>DUPREE, GEROGE D<br>640 N PENINSULA DRIVE<br>DAYTON BEACH FL | ☐ DELETE | 11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP | DUPREE GEORGE D.<br>220 S. RIDGEWOOD AVE.<br>DAYTONA BEACH, FL. | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ST<br>NOELL, GILBERT W., JR.<br>313 RIO PINAR TRL<br>ORMOND BCH FL | ☐ DELETE | 21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP | NOELL, GILBERT W. JR.<br>ONE JOHN ANDERSON DR. #620<br>ORMOND BEACH FL 32176 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>DISCH, BRAD A<br>8 TARA PLACE<br>ORMOND BEACH FL | ☐ DELETE | 31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | AST<br>ROBINSON, NANCY NOELL<br>4501 JUANITA WAY SOUTH<br>ST PETERSBURG FL | ☐ DELETE | 41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:** Gilbert W. Noell Jr. Sec - Treasur — 7-8-96 — 904-672-1110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
GILBERT W. NOELL JR. SEC - TREASUR