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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S21055

(6)

BOUNTIFUL FOODS, INC.

Principal Place 2022 6TH AVE. VERO BEACH		Mailing Address 2022 CTH AVE. VERO BEACH FL 32960-5436							
						3. Date incorporated or Qualified 12/21/1990		te of Last 23/1990	
2. Principai P 1	lace of Business	2a. Mailing Address 26			·····	4. FEI Number 65-0236133	_ <u>,</u>	h	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State 3	e	City & State				Election Campaign Financing     Trust Fund Contribution			0 May Be
Ζφ <b>4</b> ]	Country 25	Ζφ <b>29</b>	30 Co	untry			Yes [	] No	rs. 199.032,
	9. Name and Address of Currer	nt Registered Agent		<del> </del>		10. Name and Address of New Re	gistered A	gent	
	Wart, William J ESQ.			81	Name	·			
	5 OCEAN DR. 10 BEACH FL 32963			62	Street Addre	ess (P.O. Box Number is Not Acceptal	ble)		
				83					
				64	City		FL	<b>85</b> Zi	p Code
SIGNATURE	Signatur, typed or prised name of registered ago OFFICERS AN	***********	TE Registere	ed Ager	nt signature require	od when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTO	ORS IN 12
TILLE NAME STREET ADDRESS	PTD Brink, Ronald H 2022 6th Ave. Vero Beach Fl 32960	☐ DELETE	135	IAME Theet	addaess			Charig	e 🔲 Addition
CITY ST-20P TITLE	VSD BRINK, JOAN S	DELETE	21 T		F-ZIP	desident and the second stage.		Change	e Addition
NAME STREET ADDRESS	2022 6TH AVE. VERO BEACH FL 32960			TAEET	ADDRESS				
CITY - \$1 - ZIE! Title NAME	D BRINK, RANDALL L	☐ DELETE	31 T		1-219		**************************************	Charigi	e Addition
STREET ADDRESS Chiv-St-Zip	2022 6TH AVE. VERO BEACH FL 32960		335		ADDRESS				
TITLE NAME		☐ DELETE	4.1 T		1-ZIF			Charigi	e Addition
STHEET ACTURESS			4.3 S		ADDRESS				
TITLE NAME		☐ DELETE	5.1 T	ITLE	i en			Chang	e Addition
STREET ADORESS COTY - ST - 7 P			5.3 S		ADDRESS 1-Zip				
7-1LE		☐ DELETE	6.1 T			······································		Chang	e Addition
NANTE			6.2 N						
STREET ADORESS			6.3 S	TREET	address				

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information and cated 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: Ronal D. H. Being C. Statutes and the corporation of the corporation of the receiver of 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.

6.4 CITY - ST - ZIP