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

CITY-ST-ZIP

**FILED PROFIT** May 09 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # S30807 (9)TOTT FOOD CORPORATION Principal Place of Business Mailing Address 8246 BOWDEN ROAD 6246 BOWDEN ROAD SUITE 200 SUITE 200 JACKSONVILLE FL 32216 JACKSONVILLE FL 32216-8144 3. Date incorporated or Qualified 3a. Date of Last Report 02/11/1991 12/20/1996 2. Principal Place of Business 2a. Maiting Address 4. FEI Number Applied For 21 59-3043980 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip  $Z_{\rm ID}$ Country 8. This corporation has liability for intengible tax under s. 199.032, 24 25 Yes X No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ERMILIO, VINCENT J 81 Name 122 C RIO DEL MAR RD Street Address (P.O. Box Number is Not Acceptable) **SUITE 407** ST AUGUSTINE FL 32084 83 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registored Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELUTE 1.1 TOUR ☐ Change Addition BARTHELMES, STEVEN NAME 1.2 NAME 6246 BOWDEN ROAD STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-S1-7/P TITLE DELETE 2 1 11TLE ☐ Change Addition PIUS, DAVID J. NAME 2.2 NAME 6246 BOWDEN ROAD STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3 1 11TLF Addition Change ROMANG, JACK 3.2 NAME 6246 BOWDEN ROAD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 THLE Change X Addition NAME Ermilio, Vincent J 4. 2 NAME STREET ADDRESS 6246 Bowden Road 4.3 STREET ADDRESS CITY-ST-ZIP Jacksonville, FL 4.4 CHTY - \$1 - ZIP DELFTE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 6.1 THE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do 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 eath, 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