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Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S62824 (5)
1. Corporation Name
ROGERS FOODS, INC.



Principal Place of Business Mailing Address
10500 SAN JOSE BLVD 10500 SAN JOSE BLVD
JACKSONVILLE FL 32247 JACKSONVILLE FL 32247

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 10500 SAN JOSE BLVD		26 1767 HAWKCREST DR.		06/27/1991	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 City & State		28 JAX., FL		59-3068975	
24 Zip		29 32259		5. Certificate of Status Desired	
25 Country		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
26		27		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
28		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
30		31		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROGERS, JIMMY C.		81 Name	
1767 HAWKCREST DRIVE		82 Street Address (P.O. Box Number is Not Acceptable)	
JACKSONVILLE FL 32259		83	
		84 City	
		FL	
		85 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 _____ (NOTE: Registered Agent's signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
NAME	STREET ADDRESS	1.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	1.3 STREET ADDRESS	
TITLE	NAME	1.4 CITY-ST-ZIP	Change Addition
NAME	STREET ADDRESS	2.1 TITLE	
CITY-ST-ZIP	JACKSONVILLE FL	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS	Change Addition
NAME	STREET ADDRESS	2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	Change Addition
TITLE	NAME	3.2 NAME	
NAME	STREET ADDRESS	3.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	Change Addition
NAME	STREET ADDRESS	4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	Change Addition
TITLE	NAME	4.4 CITY-ST-ZIP	
NAME	STREET ADDRESS	5.1 TITLE	Change Addition
CITY-ST-ZIP		5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	Change Addition
NAME	STREET ADDRESS	5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	Change Addition
TITLE	NAME	6.2 NAME	
NAME	STREET ADDRESS	6.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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 _____ (JIMMY C. ROGERS) 2-12-98 (904) 287-5946

CR2E034 (10/97)