

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

FILED

Jan 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S81580 (0)

1. Corporation Name

TURBEVILLE FOOD PRODUCTS CORPORATION

Principal Place of Business

7402 N 56TH STREET  
TAMPA FL 33617

Mailing Address

P.O. BOX 290153  
TAMPA FL 33687

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/20/1991

4. FEI Number

59-2860661

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

Mailing Address

21 7504 TEMPLE TERRACE

26 P.O. BOX 290153

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 A

27

City & State

City & State

23 TAMPA FLA

28 TAMPA FLA

Zip

Zip

24 33637

Country

29 33687

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARTMAN AND HARTMAN C.P.A.'S P.A.  
CERTIFIED PUBLIC ACCOUNTANTS  
8894 NORTH 56TH STREET  
TEMPLE TERRACE FL 33617

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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

Signature, typed or printed 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 P  
NAME TURBEVILLE, VIRGINIA F.  
STREET ADDRESS 411 BILTMORE AVE  
CITY-ST-ZIP TAMPA FL 33617

TITLE VP  
NAME TURBEVILLE, THOMAS J.  
STREET ADDRESS 11308 LINARBOR PLACE  
CITY-ST-ZIP TAMPA FL 33617

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-98

800-346-3177

CR2E034 (10/97)