

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 206778

**Entity Name:** SOUTHERN BELLE FROZEN FOODS, INC.

**Current Principal Place of Business:**

821 VIRGINIA ST  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

P O BOX 28620  
821 VIRGINIA STREET  
JACKSONVILLE, FL 32226 US

**FEI Number: 59-0857341**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SHAW, HOWARD J  
821 VIRGINIA STREET  
JACKSONVILLE, FL 32208 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title EXECUTIVE VP/DIRECTOR  
Name SHAW, HOWARD J  
Address 10460 SYLVAN LANE W  
City-State-Zip: JACKSONVILLE FL 32257

Title PRESIDENT/DIRECTOR  
Name SHAW, JOHN R  
Address 821 VIRGINIA ST  
City-State-Zip: JACKSONVILLE FL 32208

Title SECRETARY/DIRECTOR  
Name PITMAN, SYLVIA S  
Address 821 VIRGINIA ST  
City-State-Zip: JACKSONVILLE FL 32208

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: HOWARD J. SHAW**

**EXEC. VP & DIRECTOR**

**03/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date