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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 105432

1. Corporation Name
PEPSI-COLA BOTTLING COMPANY OF FT. LAUDERDALE-PA LM BEACH, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 7305 GARDEN ROAD, RIVIERA BEACH FL 33404
 Mailing Address: C/O CENTRAL INVESTMENT CORP, PO BOX 42670, CINCINNATI OH 45242, US

3. Date Incorporated or Qualified: **10/26/1925**
 4. FEI Number: **59-0389260**
 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 the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 21
 Suite, Apt. #, etc.: 22
 City & State: 23
 Zip: 24
 Country: 25
 2a. Mailing Address: 26
 Suite, Apt. #, etc.: 27
 City & State: 28
 Zip: 29
 Country: 30

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
 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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	P <input checked="" type="checkbox"/> DELETE
NAME	ARVIDSON, PHILIP L
STREET ADDRESS	4 TARRINGTON COIRCLE
CITY-ST-ZIP	PALM BEACH GARDENS FL
TITLE	V <input type="checkbox"/> DELETE
NAME	THOMPSON, REX E
STREET ADDRESS	232 EAGLETON LAKES BLVD
CITY-ST-ZIP	PALM BEACH GARDENS FL
TITLE	D <input type="checkbox"/> DELETE
NAME	WARD, R H
STREET ADDRESS	5 SPRING KNOLL DR
CITY-ST-ZIP	CINCINNATI OH
TITLE	VD <input type="checkbox"/> DELETE
NAME	CAUDILL, RICHARD W
STREET ADDRESS	2 BANCHORY CT
CITY-ST-ZIP	PALM BCH GARDENS FL
TITLE	CD <input type="checkbox"/> DELETE
NAME	KOONS, J.F., III
STREET ADDRESS	8320 CAROLINE'S TRACE
CITY-ST-ZIP	CINCINNATI OH
TITLE	VT <input type="checkbox"/> DELETE
NAME	SHELL, KEVEN E.
STREET ADDRESS	724 YALE AVENUE
CITY-ST-ZIP	TERRACE PARK, OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Zapata, Angèl M.
1.3 STREET ADDRESS	821 Club Dr.
1.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33418
2.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Thompson, Rex E.
2.3 STREET ADDRESS	323 Ridge Rd.
2.4 CITY-ST-ZIP	Jupiter, FL 33477
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	VS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(l), 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, with all other like empowered.

SIGNATURE: William P. Martin, II **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 3/26/99 Daytime Phone #: (513) 563-4700

CR2E034 (11/98)

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#105432

Florida Department of State
Corporation Annual Report
1999

Pepsi-Cola Bottling Company of Ft. Lauderdale-Palm Beach, Inc.

Block 12

8.1 Title	D
8.2 Name	Gamstetter, Neil C.
8.3 Street Address	5578 Chatfield Dr.
8.4 City-St-Zip	Fairfield, Ohio 45014

8.1 Title	T
8.2 Name	William P. Martin, II
8.3 Street Address	36 Sabre Drive
8.4 City-St-Zip	Cold Springs, Kentucky 41076