#### Edgar Filing: FLOWERS FOODS INC - Form 5

FLOWERS FOODS INC Form 5 February 14, 2005 FORM 5

5 obligations

1(b).

Reported

Form 4 Transactions Reported

(Last)

#### **OMB APPROVAL** OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per **OWNERSHIP OF SECURITIES** response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer WOOD C MARTIN III Symbol FLOWERS FOODS INC [FLO] (Check all applicable) (First) (Middle) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) \_X\_ Director 10% Owner 01/01/2005

#### 125-C NORTH BROAD STREET, SUITE 313

(Street)

THOMASVILLE, GAÂ 31792

Officer (give title \_ Other (specify below) below)

6. Individual or Joint/Group Reporting

(check applicable line)

#### \_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person

(City)	(State) (	Zip) Tabl	e I - Non-Deri	vative Sec	curitie	s Acqu	ired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3, Amount	d (A) of d of (E 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	Â	Â	Â	Â	Â	Â	206,529	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	83.557 <u>(1)</u>	Ι	By 401(k)
Common Stock	Â	Â	Â	Â	Â	Â	1,289,457 ( <u>2)</u>	I	By Spouse
Common Stock	Â	Â	Â	Â	Â	Â	23,085 <u>(3)</u>	I	By Trust

4. If Amendment, Date Original

Filed(Month/Day/Year)

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. SEC 2270 (9-02)

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (Right to Buy) (4)	\$ 9.47	Â	Â	Â	Â	Â	04/06/2002	04/06/2011	Common Stock	22,500
Restricted Stock Award (4)	\$ 0	Â	Â	Â	Â	Â	06/07/2005	(5)	Common Stock	0

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
	Director	10% Owner	Officer	Other				
WOOD C MARTIN III 125-C NORTH BROAD STREET SUITE 313 THOMASVILLE, GA 31792	ÂX	Â	Â	Â				
Signatures								
Stephen R. Avera, 02/14, Agent	/2005							

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Total includes exempt acquisitions of shares allocated to reporting person in Issuer's 401(k) Plan, as of the 2004 fiscal year end, 01/01/2005.

(2) Beneficial ownership is disclaimed.

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- (3) By trust for reporting person's mother.
- (4) Granted pursuant to the Flowers Foods, Inc. 2001 Equity and Performance Incentive Plan.
- (5) No expiration date.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.