Form 5 February 14, 2005	í								
FORM 5					OMB AF	PROVAL			
Check this box if	UNITED	STATES	OMB Number:	3235-0362 January 31,					
no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	ANN	NUAL ST	Expires: Estimated a burden hour response	2005 verage					
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 Reported Form 4 30(h) of the Investment Company Act of 1940 Transactions Reported									
1. Name and Address of Reporting Person <u>*</u> LORD GENE D			2. Issuer Name <b>and</b> Ticker or Trading Symbol FLOWERS FOODS INC [FLO]	5. Relationship of I Issuer					
(Last) (1)	, , ,	(Middle)	<ul><li>3. Statement for Issuer's Fiscal Year Ended</li><li>(Month/Day/Year)</li><li>01/01/2005</li></ul>	Director X Officer (give t below)	title Othe below)	Owner r (specify			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi	D Bakeries Gro nt/Group Repo applicable line)	•			

## THOMASVILLE, GAÂ 31757

LORD GENE D

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

(City)	(State) (	Zip) Table	e I - Non-Deri	vative Sec	curitie	es Acqu	ired, Disposed o	f, or Beneficial	lly 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	37,017	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	697.167 <u>(1)</u>	Ι	By 401(k)

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

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

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

(9-02)

## Edgar Filing: LORD GENE D - Form 5

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)	5. Number of Derivati Securitic Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Da (Month/Day/ ve s 1	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) (2)	\$ 9.47	Â	Â	Â	Â	04/06/2005	04/06/2011	Common Stock	74,700	
Option (Right to Buy) (2)	\$ 21.02	Â	Â	Â	ÂÂ	07/16/2007	07/16/2013	Common Stock	102,150	

## **Reporting Owners**

Reporting Owner Name / Address	5	Relationships							
I O		10% Owner	Officer	Other					
LORD GENE D 1925 FLOWERS CIRCLE THOMASVILLE, GA 3175	Â 57	Â	Pres/COO Bakeries Group	Â					
Signatures									
Stephen R. Avera, 02 Agent	/14/2005								

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* 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) Granted pursuant to the Flowers Foods, Inc. 2001 Equity and Performance Incentive Plan.

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.