PUBLIX SUPER MARKETS INC

Form 5

February 14, 2005

(Last)

(City)

OMB APPROVAL FORM 5 **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 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer SHIVERS EDWARD T Symbol PUBLIX SUPER MARKETS INC (Check all applicable) [NONE]

Director 10% Owner _ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2004 Vice President P.O. BOX 407

3. Statement for Issuer's Fiscal Year Ended

(Street) 4. If Amendment, Date Original

(Middle)

Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

LAKELAND, Â FLÂ 338020407

(State)

Reminder: Report on a separate line for each class of

securities beneficially owned directly or indirectly.

(First)

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	(Zlp) Tab	le I - Non-Dei	rivative Secur	ities A	cquire	d, Disposed of, o	or Beneficially	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. Securities (A) or Dispos (Instr. 3, 4 an	sed of		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	03/01/2004	Â	J <u>(1)</u>	457.8526	A	\$0	45,775.372	I	By ESOP
Common Stock	Â	Â	Â	Â	Â	Â	13,175	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	1,000	I	By Spouse

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)

Edgar Filing: PUBLIX SUPER MARKETS INC - Form 5

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									or	
						Date Exercisable	Expiration Date	Title	Number	
								of		
					(A) (D)				Shares	

of D

> Is Fi

Reporting Owners

Reporting Owner Name / Address	Relationships							
rr a g a m a m a m a m a m a m a m a m a m	Director	Director 10% Owner Officer		Other				
SHIVERS EDWARD T P.O. BOX 407 LAKELAND, FL 338020407	Â	Â	Vice President	Â				

Signatures

By: Robert C. Weigel (POA on file)

**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) Acquired under the Publix Super Markets, Inc. Employee Stock Ownership Plan. Transaction exempt under rule 16b-3(c).

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.

Reporting Owners 2