

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006938

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: HERSHEY CREAMERY COMPANY

**Current Principal Place of Business:**

301 S. CAMERON STREET  
HARRISBURG, PA 17101

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1821  
HARRISBURG, PA 17105

**New Mailing Address:**

FEI Number: 23-0691670      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: HOLDER, GEORGE H  
Address: 1800 WARREN STREET  
City-St-Zip: NEW CUMBERLAND, PA 17070

Title: DP ( ) Delete  
Name: HOLDER, GEORGE HUGH  
Address: 1705 FAIRMONT DRIVE  
City-St-Zip: MECHANICSBURG, PA 17055

Title: D ( ) Delete  
Name: PYKE, EARL W  
Address: 508 E. LOCUST STREET  
City-St-Zip: MECHANICSBURG, PA 17055

Title: VP ( ) Delete  
Name: RYAN, THOMAS J III  
Address: 19 EMLYN LANE  
City-St-Zip: MECHANICSBURG, PA 17055

Title: S ( ) Delete  
Name: HOLDER, WALTER S  
Address: 31 SUNFIRE AVENUE  
City-St-Zip: CAMP HILL, PA 17020

Title: T ( ) Delete  
Name: HOLDER, THOMAS M  
Address: 359 MARTINGALE DRIVE  
City-St-Zip: CAMP HILL, PA 17020

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT J. CAMPBELL

MR.

01/03/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date