2002 Uniform Business Report (UBR)

of the corporation or the receiver or trusts changed, or on an attachment with an ad-

SIGNATURE:

Apr 04, 2002 8:00 am Secretary of State DOCUMENT # F96000001621 1. Entity Name 04-04-2002 90002 024 ***150 00 UNITED NATURAL FOODS, INC. Mailing Address Principal Place of Business 190 MAIN STREET 200 LAKE RD **DANIELSON CT 06239** DAYVILLE CT 06241 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 05-0376157 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/01) ☐ Addition ☐ Change TITLE TITLE ☐ Delete DC NAME SIMONE, THOMAS B NAME STREET ADDRESS STREET ADDRESS 260 LAKE ROAD CITY-ST-ZIP CITY-ST-ZIP **DAYVILLE CT 06241** Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME FUNK, MICHAEL S STREET ADDRESS STREET ADDRESS 260 LAKE RD CITY-ST-7IP CITY-ST-ZIP DAYVILLE CT ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME TOWNSEND, STEVEN H STREET ADDRESS STREET ADDRESS 260 LAKE RD CITY-ST-ZIP CITY-ST-ZIP DAYVILLE CT ☐ Addition Change TITLE TITLE Delete ٧S NAME NAME ATWOOD, DANIEL V STREET ADDRESS STREET ADDRESS 260 LAKE RD CITY-ST-ZIP CITY-ST-ZIP DAYVILLE-CT Change ☐ Addition TITLE Delete TITLE NAME NAME WEINTRAUB, TODD STREET ADDRESS STREET ADDRESS 260 LAKE RD CITY-ST-ZIP CITY-ST-ZIP DAYVILLE CT 06241 ☐ Change Addition TITLE ☐ Delete TITLE NAME MICHEL, KEVIN T STREET ADDRESS STREET ADDRESS 260 LAKE RD CITY-ST-ZIP CITY-ST-ZIP **DAYVILLE CT** 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 flustre empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all after like empowered.

3/20/02

nie IV. Atwood