2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005
Secretary of State

DOCUMENT# F96000001621

Entity Name: UNITED NATURAL FOODS, INC.

Current Principal Place of Business:

260 LAKE RD
DAYVILLE, CT 06241

New Principal Place of Business:

260 LAKE ROAD
DAYVILLE, CT 06241

Current Mailing Address:

190 MAIN STREET
DANIELSON, CT 06239

New Mailing Address:

260 LAKE ROAD
DAYVILLE, CT 06241

FEI Number: 05-0376157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT 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: PD ( ) Delete
Name: TOWNSEND, STEVEN H
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06241

Title: T ( ) Delete
Name: PUCKETT, RICK D
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241

Title: S ( ) Delete
Name: ATWOODND, DANIEL V
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241

Title: AS ( ) Delete
Name: WALKER, CARRIE
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241

Title: D ( ) Delete
Name: BARKER, GORDON D
Address: 14525 HIGHWAY 7
City-St-Zip: MINNETONKA, MN 553453742

Title: VCB (X) Delete
Name: SIMONE, THOMAS B
Address: 811 WILD OAK DRIVE
City-St-Zip: SANTA ROSA, CA 95409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CFOT (X) Change ( ) Addition
Name: PUCKETT, RICK D
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241

Title: S (X) Change ( ) Addition
Name: ATWOOD, DANIEL V
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241

Title: VCB (X) Change ( ) Addition
Name: SIMONE, THOMAS B
Address: 811 WILD OAK DRIVE
City-St-Zip: SANTA ROSA, CA 95409

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 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 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: RICK D. PUCKETT CFOT 04/19/2005

Electronic Signature of Signing Officer or Director — Date