2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# F96000005143

Entity Name: GEORGE WESTON BAKERIES DISTRIBUTION INC.

Current Principal Place of Business:

55 PARADISE LN
BAY SHORE, NY 11706

New Principal Place of Business:

Current Mailing Address:

55 PARADISE LN
BAY SHORE, NY 11706

New Mailing Address:

FEI Number: 22-3471696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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: DP ( ) Delete
Name: COWLES, JOHN
Address: 55 PARADISE LN
City-St-Zip: BAY SHORE, NY 11706

Title: VPD ( ) Delete
Name: PETERSEN, WILLIAM
Address: 55 PARADISE LN
City-St-Zip: BAY SHORE, NY 11706

Title: S ( ) Delete
Name: SELIGMAN, SHELLY
Address: 55 PARADISE LN
City-St-Zip: BAY SHORE, NY 11706

Title: T ( ) Delete
Name: LACCHIN, LOUISE
Address: 55 PARADISE LN
City-St-Zip: BAY SHORE, NY 11706

Title: D ( ) Delete
Name: MAVRINAC, RICHARD
Address: 55 PARADISE LN
City-St-Zip: BAY SHORE, NY 11706

Title: VP ( ) Delete
Name: LEE, RICK
Address: 2821 EMERYWOOD PARKWAY
City-St-Zip: RICHMOND, VA 23294

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: VPT (X) Change ( ) Addition
Name: LEE, RICK
Address: 2821 EMERYWOOD PARKWAY
City-St-Zip: RICHMOND, VA 23294

I hereby certify that the information supplied with this filing does not qualify 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: RICK LEE VPT 04/09/2008

Electronic Signature of Signing Officer or Director — Date