

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002360

FILED
Apr 18, 2011
Secretary of State

Entity Name: SEE'S CANDY SHOPS, INCORPORATED

Current Principal Place of Business:

210 EL CAMINO REAL
SO. SAN FRANCISCO, CA 94080

New Principal Place of Business:

Current Mailing Address:

210 EL CAMINO REAL
SO. SAN FRANCISCO, CA 94080

New Mailing Address:

FEI Number: 95-1205740

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

OFFICERS AND DIRECTORS:

Title: CD
Name: BUFFETT, WARREN E
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: PCEO
Name: KINSTLER, BRADLEY D
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: V
Name: VAN DOREN, RICHARD
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: V
Name: AREVALO, DONNA
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: STCF
Name: SCOTT, KENNETH
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: D
Name: MUNGER, CHARLES T
Address: 210 EL CAMINO REAL
City-St-Zip: SO. SAN FRANCISCO, CA 94080

I hereby 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 all other like empowered.

SIGNATURE: KENNETH C. SCOTT

SECR

04/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date