

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10648

FILED
Jan 17, 2008
Secretary of State

Entity Name: BURNS PHILP FOOD INC.

Current Principal Place of Business:

1350 TIMBERLAKE MANOR PARKWAY
SUITE 550
CHESTERFIELD, MO 63017 US

New Principal Place of Business:

Current Mailing Address:

1350 TIMBERLAKE MANOR PARKWAY
SUITE 550
CHESTERFIELD, MO 63017 US

New Mailing Address:

FEI Number: 22-2723920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: ARMSTRONG, ANDREW S
Address: 240 LARKIN WILLIAMS INDUSTRIAL CT.
City-St-Zip: FENTON, MO 63026 US

Title: VSGC () Delete
Name: SCIACKITANO, CARMEN
Address: 240 LARKIN WILLIAMS INDUSTRIAL CT.
City-St-Zip: FENTON, MO 63026 US

Title: CFO () Delete
Name: BOHNERT, CHRIS
Address: 240 LARKIN WILLIAMS INDUSTRIAL CT.
City-St-Zip: FENTON, MO 630262413 US

Title: AS () Delete
Name: PETTY, GEORGE O
Address: 240 LARKIN WILLIAMS INDUSTRIAL CT.
City-St-Zip: FENTON, MO 630262413

Title: D () Delete
Name: ANTONELLI, DAN
Address: 240 LARKIN WILLIAMS INDUSTRIAL CT.
City-St-Zip: FENTON, MO 630262413 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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 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: ANDREW ARMSTRONG

PRES

01/17/2008

Electronic Signature of Signing Officer or Director

_____ Date