2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001088

Address:

City-St-Zip:

1801 DOUGLAS DRIVE

SANFORD, NC 27330

FILED Mar 28, 2007 Secretary of State

| Entity Nai | me: THE PAN | ITRY, INC. | | | | |
|--|--|----------------------------------|---|--|--------------------------------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
| 1801 DOUGLAS DRIVE PO BOX 1410 SANFORD, NC 27330 | | | | 1801 DOUGLAS DRIVE SANFORD, NC 27330 | | |
| Current M | lailing Addres | s: | New Maili | New Mailing Address: | | |
| P. O. BOX SANFORE | 1410 D, NC 27330 | | | | | |
| FEI Number: 56-1574463 FEI Number Applied For () | | | FEI Number Not Appl | El Number Not Applicable () Certificate of Status Desired () | | |
| Name and | Address of C | current Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| 225 WATE | ILSEY & BUSE ER STREET, S VILLE, FL 322 | UITE 1800 | | | | |
| The above in the State | named entity s of Florida. | submits this statement for the p | ourpose of changing i | ts registered | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | | |
| | Electror | ic Signature of Registered Age | ent | | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () SODINI, PETER 1112 SILVER O RALEIGH, NC | OAK CT. | Title: Name: Address: City-St-Zip: | (| () Change () Addition | |
| Title: Name: Address: City-St-Zip: | FERREIRA, ST | GRASS COURT | Title: Name: Address: City-St-Zip: | FERREIRA, S | NGRASS COURT | |
| Title: Name: Address: City-St-Zip: | V () KELLY, DANIEI 106 LAMARACI CARY, NC 275 | < WAY | Title: Name: Address: City-St-Zip: | KELLY, DANI 106 LAMARA | CK WAY | |
| Title: Name: Address: City-St-Zip: | V () ZABORSKI, DA 220 WOODLAN PINEHURST, N | ID DRIVE | Title: Name: Address: City-St-Zip: | SVP (ZABORSKI, E 220 WOODL/ PINEHURST, | AND DRIVE | |
| Title: Name: | AS () EPLEY, BERRY | Delete / L | Title: Name: | (| () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: BERRY L. EPLEY AS 03/28/2007