

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000000384

Entity Name: WAKEFERN FOOD CORP.**Current Principal Place of Business:**5000 RIVERSIDE DRIVE
KEASBEY, NJ 08832**Current Mailing Address:**5000 RIVERSIDE DRIVE
KEASBEY, NJ 08832 US**FEI Number:** 22-1434516**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title PRESIDENT
Name SHERIDAN , JOSEPH M.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title SECRETARY
Name ROMANO , DOMINICK J.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title TREASURER
Name INSERRA , LAWRENCE R. JR.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name COLALILLO , JOSEPH S.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name TULLY , RICHARD
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name SITAR , LEONARD
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name MCMENAMIN , RICHARD
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name LOCURCIO , VINCENT
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

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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: JOSEPH SHERIDAN

PRESIDENT

01/25/2016

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name INFUSINO , CHARLES M.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name COLLINS , LAWRENCE SR.
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title ASST. TREASURER
Name BROWN, JEFFREY
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name GARAFALO, HARRY
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title VC
Name GLASS, IRV
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name KLEIN, MARSHALL
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title ASST. SECRETARY
Name SUMAS, NICHOLAS
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name ZALLIE, DAVID
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name GREENFIELD , JON
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name CLARE , ROBERT
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title DIRECTOR
Name COE, JORDAN
Address 5000 RIVERSIDE DRIVE
City-State-Zip: KEASBEY NJ 08832

Title ASST. SECRETARY
Name GLADSTEIN, NED
Address 5000 RIVERSIDE DRIVE
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Title DIRECTOR
Name GREENSTEIN, NEIL
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Title ASST. TREASURER
Name SAKER, RICHARD
Address 5000 RIVERSIDE DRIVE
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Title VC
Name WOLFSON, LARRI
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