

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000001655

**Entity Name:** SUPERVALU HOLDINGS, INC.**Current Principal Place of Business:**7075 FLYING CLOUD DR  
EDEN PRAIRIE, MN 55344**Current Mailing Address:**CORP TAX DEPT  
PO BOX 20  
BOISE, ID 83726**FEI Number:** 43-0781167**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	DIR, PRES, SEC
Name	ROBERTSON, KARLA
Address	7075 FLYING CLOUD DR
City-State-Zip:	EDEN PRAIRIE MN 55344

Title	VP
Name	TROYER, DOYLE
Address	250 PARKCENTER BLVD
City-State-Zip:	BOISE ID 83706

Title	VP, TREAS
Name	HART, DEVON
Address	250 PARKCENTER BLVD
City-State-Zip:	BOISE ID 83706

Title	ASST SEC
Name	NUNZIATO, BARBRA
Address	150 PIERCE RD STE 200
City-State-Zip:	ITASCA IL 60143

Title	VP
Name	BESANKO, BRUCE
Address	7075 FLYING CLOUD DR
City-State-Zip:	EDEN PRAIRIE MN 55344

Title	MGR, VP
Name	JOHNSON, DAVID
Address	7075 FLYING CLOUD DR
City-State-Zip:	EDEN PRAIRIE MN 55344

Title	VP
Name	MCFARLAND, STUART
Address	7075 FLYING CLOUD DR
City-State-Zip:	EDEN PRAIRIE MN 55344

Title	VP
Name	MYRDAHL, KIMBERLY
Address	7075 FLYING CLOUD DR
City-State-Zip:	EDEN PRAIRIE MN 55344

*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:** DOYLE TROYER**VICE PRESIDENT****03/25/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date