## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001621

Entity Name: UNITED NATURAL FOODS, INC.

**Current Principal Place of Business:** 

313 IRON HORSE WAY PROVIDENCE, RI 02908

**Current Mailing Address:** 

313 IRON HORSE WAY PROVIDENCE, RI 02908 US

FEI Number: 05-0376157 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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

**FILED** Apr 17, 2014

**Secretary of State** 

CC2631057832

## Officer/Director Detail :

Title T. CFO. VP Title P. CEO

SHAMBER, MARK E SPINNER, STEVEN L. Name Name 313 IRON HORSE WAY 313 IRON HORSE WAY Address Address City-State-Zip: PROVIDENCE RI 02908 PROVIDENCE RI 02908 City-State-Zip:

Title S. VP Title D

Name TRAFICANTI, JOSEPH J SPINNER, STEVEN L Name Address 313 IRON HORSE WAY Address 313 IRON HORSE WAY PROVIDENCE RI 02908 City-State-Zip: PROVIDENCE RI 02908 City-State-Zip:

Title Title

Name DZIKI, THOMAS A. SHAMBER, MARK E Name Address 313 IRON HORSE WAY 313 IRON HORSE WAY Address PROVIDENCE RI 02908 City-State-Zip: PROVIDENCE RI 02908 City-State-Zip:

Title VΡ Title ASST. SECRETARY

Name GRIFFIN, SEAN F. WALKER, CARRIE L. Name 313 IRON HORSE WAY Address 313 IRON HORSE WAY Address City-State-Zip: PROVIDENCE RI 02908 PROVIDENCE RI 02908 City-State-Zip:

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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: MARK E. SHAMBER T, CFO, VP

Electronic Signature of Signing Officer/Director Detail

04/17/2014

Date

## Officer/Director Detail Continued:

City-State-Zip: PROVIDENCE RI 02908

Title VΡ Title DIRECTOR Name DORNE, ERIC A. Name ROY, PETER A.

Address 313 IRON HORSE WAY Address 313 IRON HORSE WAY City-State-Zip: PROVIDENCE RI 02908 City-State-Zip: PROVIDENCE RI 02908

Title **DIRECTOR** Title **DIRECTOR** 

Name CLARK, DENISE M. SCHNIEDERS, RICHARD J. Name 313 IRON HORSE WAY Address 313 IRON HORSE WAY Address PROVIDENCE RI 02908 City-State-Zip: City-State-Zip: PROVIDENCE RI 02908

Title DIRECTOR, CHAIRMAN Title DIRECTOR Name FUNK, MICHAEL S. GRAHAM, GAIL A. Name Address 313 IRON HORSE WAY 313 IRON HORSE WAY Address City-State-Zip: PROVIDENCE RI 02908

Title DIRECTOR Title DIRECTOR

Name BATES, ANN TORRE Name HEFFERNAN, JAMES P. Address 313 IRON HORSE WAY Address 313 IRON HORSE WAY City-State-Zip: PROVIDENCE RI 02908 City-State-Zip: PROVIDENCE RI 02908