2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2016
Secretary of State
CC8749141833

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

Officer/Director Detail :

Title	T, CFO, VP
Name	ZECHMEISTER, MICHAEL
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	D
Name	SPINNER, STEVEN L
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	VP
Name	DZIKI, THOMAS A.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	VP
Name	DORNE, ERIC A.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	P, CEO
Name	SPINNER, STEVEN L.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	S, VP
Name	TRAFICANTI, JOSEPH J
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	VP, COO
Name	GRIFFIN, SEAN F.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	DIRECTOR
Name	ROY, PETER A.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Continues on page 2

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: MICHAEL ZECHMEISTER VP, CFO, T 04/25/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CLARK, DENISE M.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

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

Title	DIRECTOR
Name	BATES, ANN TORRE
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

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

Title	DIRECTOR
Name	HEFFERNAN, JAMES P.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908

Title	DIRECTOR
Name	ARTZ, ERIC F.
Address	313 IRON HORSE WAY
City-State-Zip:	PROVIDENCE RI 02908