

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33098

Entity Name: INSTITUTION FOOD HOUSE, INC.

Current Principal Place of Business:

543 12TH STREET DRIVE NW
HICKORY, NC 28601

Current Mailing Address:

12500 WEST CREEK PARKWAY
RICHMOND, VA 23238 US

FEI Number: 56-0851105

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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 CD
Name PEARCE, WILLIAM M
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

Title PRESIDENT
Name SHOEMAKER, ERIC
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

Title DVS
Name MILLER, MICHAEL L
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

Title VPF
Name GIBBS, EMELINE
Address 543 12TH STREET DRIVE NW
City-State-Zip: HICKORY NC 28601

Title VT
Name FENDER, JEFFERY W
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

Title DCFO
Name EVANS, ROBERT D
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

Title VP
Name BERKE, KENT R
Address 12500 WEST CREEK PARKWAY
City-State-Zip: RICHMOND VA 23238

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 L. MILLER

SECRETARY

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date