FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **804460** **(4)**

1. Corporation Name

THE PILLSBURY COMPANY

Principal Place of Business

200 SOUTH SIXTH STREET
MINNEAPOLIS MN 55402-1407

Mailing Address

200 SOUTH SIXTH STREET
MINNEAPOLIS MN 55402-1407

3. Date Incorporated or Qualified: **10/26/1935**

3a. Date of Last Report: **04/26/1995**

4. FEI Number: **41-0481770** — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 — Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 — Country 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HAILEY, V. A		1.2 NAME	
STREET ADDRESS	200 S 6TH ST		1.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		1.4 CITY, ST, ZIP	
TITLE	CD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BULL, GEORGE J.		2.2 NAME	
STREET ADDRESS	200 S. 6TH STREET		2.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		2.4 CITY, ST, ZIP	
TITLE	VS	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	JENKO, JEROME J.		3.2 NAME	
STREET ADDRESS	200 S. 6TH STREET		3.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		3.4 CITY, ST, ZIP	
TITLE	DP	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	WALSH, PAUL S.		4.2 NAME	
STREET ADDRESS	200 S. 6TH STREET		4.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		4.4 CITY, ST, ZIP	
TITLE	VP	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	BEHNKE, JAMES R.		5.2 NAME	
STREET ADDRESS	200 S. 6TH STREET		5.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		5.4 CITY, ST, ZIP	
TITLE	AS	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, LESLIE R		6.2 NAME	
STREET ADDRESS	200 SOUTH 16TH ST		6.3 STREET ADDRESS	
CITY, ST, ZIP	MINNEAPOLIS MN		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this report is correct, and I do hereby furnish, and declare and qualify, for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and acknowledged that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: LESLIE R. JOHNSON ASST SEC. 3/27/96 612 330-4915

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

CR2E034 (12/95)