

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90120 014 ***150.00

DOCUMENT # 827896

1. Corporation Name

MONFORT FOOD DISTRIBUTION COMPANY

Principal Place of Business

ONE CONAGRA DRIVE CC-360
OMAHA NE 68102-0010

Mailing Address

ONE CONAGRA DRIVE CC-360
OMAHA NE 68102-0010



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/02/1972

4. FEI Number

84-0519874

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

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

One ConAgra Drive CC241
Suite, Apt. #, etc.

2a. Mailing Address

One ConAgra Drive CC241
Suite, Apt. #, etc.

City & State

Zip Country

24 68102-5001 25

City & State

Zip Country

29 68102-5001 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 607.0502 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME LEE O LOCHMANN
STREET ADDRESS 1425 PERSIMMON DRI
CITY-ST-ZIP ST CHARLES IL

TITLE D ☒ DELETE
NAME LOCHMANN, LEE O
STREET ADDRESS 1425 PERSIMMON DR
CITY-ST-ZIP ST CHARLES IL 60174

TITLE VP ☐ DELETE
NAME KEITH, DEBRA L
STREET ADDRESS 2918 BLACKHAWK CIR
CITY-ST-ZIP OMAHA NE 68123

TITLE AS ☒ DELETE
NAME BADBERG, SUE
STREET ADDRESS 4629 CAPITOL AVE
CITY-ST-ZIP OMAHA NE

TITLE D ☒ DELETE
NAME MICHAEL J ECKMAN
STREET ADDRESS 2904 ROYAL FOX
CITY-ST-ZIP ST CHARLES IL

TITLE D ☐ DELETE
NAME DIFONZO, KEN
STREET ADDRESS 16646 HOWARD CIR
CITY-ST-ZIP OMAHA NE 68118

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President & D ☒ Change ☐ Addition
1.2 NAME Thomas L. Manuel
1.3 STREET ADDRESS 11364 William Plaza
1.4 CITY-ST-ZIP Omaha, NE 68144

2.1 TITLE D ☐ Change ☐ Addition
2.2 NAME Kenneth W. DiFonzo
2.3 STREET ADDRESS 16646 Howard Circle
2.4 CITY-ST-ZIP Omaha, NE 68128

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Assistant Corporate Sec ☒ Change ☐ Addition
4.2 NAME David G. Withers
4.3 STREET ADDRESS 8105 North 40 Street
4.4 CITY-ST-ZIP Omaha, NE 68112

5.1 TITLE VP & Secretary ☒ Change ☐ Addition
5.2 NAME James P. O'Donnell
5.3 STREET ADDRESS 1129 South 181 Plaza
5.4 CITY-ST-ZIP Omaha, NE 68130

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra L Keith REQUIRED
Debra L Keith, VP-Tax

4/20/99

(402) 595-4575

CR2E034 (11/98)