

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837470

FILED
Apr 30, 2009
Secretary of State

Entity Name: GOLDEN FLAKE SNACK FOODS, INC.

Current Principal Place of Business:

ONE GOLDEN FLAKE DRIVE
BIRMINGHAM, AL 35233 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2447
BIRMINGHAM, AL 352012447 US

New Mailing Address:

FEI Number: 63-0711846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CBD () Delete
Name: STEIN, JOHN S
Address: 1 GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

Title: C () Delete
Name: TOWNSEND, PATTY
Address: ONE GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

Title: VD () Delete
Name: JONES, DAVE
Address: ONE GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

Title: AC () Delete
Name: HARRINGTON, JAMES R JR
Address: 1 GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

Title: PTD () Delete
Name: MCCUTCHEON, MARK
Address: 1 GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

Title: VD () Delete
Name: BATES, RANDY
Address: 1 GOLDEN FLAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES R HARRINGTON JR.

AC

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date