2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008
Secretary of State

DOCUMENT# F00000002863

Entity Name: BEST BRANDS CORP.

Current Principal Place of Business:

111 CHESHIRE LANE
MINNETONKA, MN 55305

New Principal Place of Business:

Current Mailing Address:

111 CHESHIRE LANE
MINNETONKA, MN 55305

New Mailing Address:

FEI Number: 31-1708815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	HUMPHREY, G. SCOTT	
Address:	445 HUTCHINSON AVENUE, SUITE 800	
City-St-Zip:	COLUMBUS, OH 43235	
Title:	VPD	( ) Delete
Name:	SUNENSHINE, HARRY S	
Address:	445 HUTCHINSON AVENUE, SUITE 800	
City-St-Zip:	COLUMBUS, OH 43235	
Title:	VPD	( ) Delete
Name:	SCHULTZ, MICHAEL	
Address:	111 CHESHIRE LANE	
City-St-Zip:	MINNETONKA, MN 55305	
Title:	D	( ) Delete
Name:	CASCIO, PAUL H	
Address:	3201 ENTERPRISE PKWY, STE 350	
City-St-Zip:	BEACHWOOD, OH 44122	
Title:	D	( ) Delete
Name:	SMITH, DOUGLAS A	
Address:	445 HUTCHINSON AVENUE, SUITE 800	
City-St-Zip:	COLUMBUS, OH 43235	
Title:	S	( ) Delete
Name:	HILL, JAMES M	
Address:	20 PUBLIC SQUARE, SUITE 2300	
City-St-Zip:	CLEVELAND, OH 44114	

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:	VP	(X) Change ( ) Addition
Name:	ANDERSON, JODY	
Address:	111 CHESHIRE LANE, SUITE 100	
City-St-Zip:	MINNETONKA, MN 55305	
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: JODY ANDERSON VP 05/22/2008

Electronic Signature of Signing Officer or Director Date