2007 FOR PROFIT CORPORATION

ANNUAL REPORT



03-16-2007 90027 043 *** 150.00

FILE (F00000006306 SECRETARY OF STATE DIVISION OF CORPORATIONS

1. Entity Name MCLANE FOODSERVICE, INC.					97 (MAR 21	AM 7: 4	1		
Principal Place of Business 4747 MCLANE PARKWAY TEMPLE, TX 76504		Mailing Address P.O. BOX 6115 TEMPLE, TX 76503-6115								
2. Principal Pla	ace of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			01042007	Chg-P	CR2E034 (1:	2/06)		
City & State		City & State			4. FEI Number 74-2968584			Applied For Not Applicable		
Zip	Country	Zip	Country		5. Certificate of Sta	tus Desired		5 Additi Required	ional	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Street A	Street Address (P.O. Box Number is Not Acceptable)			
INCONTING	SEE, 1 E 32301-2323									
				City FL Zip Code						
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent. SIGNATIBE.										
SIGNATURE_	Signature, typed or printed name of registered ager	ti and title # spolicable. (NOTE:	Registered Agent signs	KULI IODVŅO	d when remotating)		DATE			
FILE NOWILI FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	OFFICERS ANI		11.	Ta: :	ADDITIONS/CHA				IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	PD Delete TITE ROSIER, WILLIAM G NAW 4747 MCLANE PARKWAY STR TEMPLE, TX 76504 CT			Ros 474	Chief Exec Officer/Director & Change Addition Rosier, William G. 1747 McLane Parkway Temple, TX 76504					
TITLE NAME STREET ADDRESS CITY-ST-ZP	S MEWHINNEY, LEN 4747 MCLANE PARKWAY TEMPLE, TX 76504	☐ Delete	TITLE NAME STREET AOORESS CITY-ST-ZIP					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KOCH, KEVIN J 4747 MCLANE PARKWAY TEMPLE, TX 76504	☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-DP	AT MANN, CAROLINE R 4747 MCLANE PARKWAY TEMPLE, TX 78504	Ø Delzie	TITLE NAME STREET ADDRESS CITY-SI-ZIP	Ken 474	c V Pres/Di t, Yames L. 7 McLane Pa ple, TX 765	rkwav		Change	Addition	
TITLE HAME STREET ADDRESS CITY-ST-ZIP	D ROSIER, WILLIAM 4747 MCLANE PARKWAY TEMPLE, TX 76504	Q Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>				Change	☐ Addition	
12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the comporation or the receiver or trustae empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 If changed, or on an attachment with an address, with all others are empowered.										
SIGNAT		2/26/07								
1	SIGNATURE AND TYPED C	R PRINTED NAME OF SIGNING OFFICER	DR DIRECTOR			Date	Dayterne	Phone 8		