2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 8:00 am Secretary of State 04-16-2007 90331 030 ***150.00

330-722-7888 Daytime Phone #

DOCUMENT # F01000001248 1. Entity Name BIL-JAC FOODS INC.					•	04-16-2007	90331 030)130	J.00	
Principal Place of Business 3457 MEDINA ROAD MEDINA, OH 44256		Mailing Address 3457 MEDINA ROAD MEDINA, OH 44256					II as ini asini keli	I HOM BIOCH IZE	1881 1881	
2. Principal Place of Business - No P.O. Box# 3337 MEDIA RCAD Suite, Apt. #, etc.		3. Mailing Address 3337 MEDINA ROAD Suite, Apr. #, etc.)	04042007	Chg-P	CR2E03			
City & State MENTALALOH		City & State MEDIMA, OH			4. FEI Number 34-070				plied For t Applicable	
Zip Country		zip44256	Country		5. Certificate	of Status Desired		8.75 Add		
6. Name and Address of Current Registered Agent			Nama	7. Name and Address of New Registered Agent Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)						
						<u> </u>				
	·		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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
	Ospetition, typed or printed harro or registered agent a	nd side it approaches. (INO/E: Yiel	Jaioreo Agent signat	are reduited	Wite Learning)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					.00 May Be ed to Fees					
10.	OFFICERS AND I		11.	1	ADDITIONS	CHANGES TO OFF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KELLY, ROBERT W 4200 BEACH ROAD MEDINA, OH 44256	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD KELLY, JAMES C 3915 WESTWOOD DRIVE MEDINA, OH 44256	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	42	BI BEAG	H ROAN	,	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD KELLY, RAYMOND C 3885 WOODBERRY DRIVE MEDINA, OH 44256	□ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SANFORD, JO ANNE 4235 WEYMOUTH ROAD MEDINA, OH 44256	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	39.5	5 BARRI	INGTON [,	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KELLY, WILLIAM H 2047 GRANGER ROAD MEDINA, OH 44256	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition A	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an aggress, with all other like empowered.										