

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 20, 2004 08:00 AM
Secretary of State

DOCUMENT # F01000003685 1. Entity Name WELCH FOODS INC., A COOPERATIVE	
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Principal Place of Business 3 CONCORD FARMS 575 VIRGINIA ROAD CONCORD, MA 01741	Mailing Address 3 CONCORD FARMS 575 VIRGINIA ROAD CONCORD, MA 01741
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DO NOT WRITE IN THIS SPACE

	
08122004 No Chg-P CR2E034 (10/03)	
4. FEI Number 16-0998906	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not applicable)

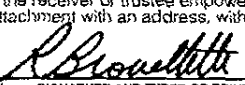
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO DILLON, DANIEL P 3 CONCORD FARMS; 575 VIRGINIA RD CONCORD, MA 01742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LUKIEWSKI, DAVID J 3 CONCORD FARMS; 575 VIRGINIA RD CONCORD, MA 01742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WRIGHT, ALBERT B III 3 CONCORD FARMS; 575 VIRGINIA RD CONCORD, MA 01742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GETTIG, THOMAS E 3 CONCORD FARMS; 575 VIRGINIA RD CONCORD, MA 01742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS TSENG, VIVIAN S. Y. 3 CONCORD FARMS; 575 VIRGINIA RD CONCORD, MA 01742
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROUILLETTE, RICHARD C 3 CONCORD FARMS; 575 VIRGINIA ROAD CONCORD, MA 01742

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08/20/04-00004-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 address, with all other like empowered

SIGNATURE:  **Richard Brouillette**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/12/04 978 371 3643
Date Day/Even Phone #