

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 10, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000003685

1. Entity Name
WELCH FOODS INC., A COOPERATIVE



Principal Place of Business

**3 CONCORD FARMS
575 VIRGINIA ROAD
CONCORD, MA 01741**

Mailing Address

**3 CONCORD FARMS
575 VIRGINIA ROAD
CONCORD, MA 01741**



02042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**1100000223322
02/10/05-80040-003 150.00**

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

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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

2-4-05 978-371-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #