2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003766

Entity Name: CONAGRA FOODS FOOD INGREDIENTS COMPANY, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
ONE CONAGRA DRIVE OMAHA, NE 68102				ONE CONAGRA DRIVE, 1-237 OMAHA, NE 68102			
Current M	lailing Addres	s:		New Maili	ng Address:	:	
ONE CONAGRA DRIVE OMAHA, NE 68102				ONE CONAGRA DRIVE, 1-237 OMAHA, NE 68102			
FEI Number	: 20-1248932	FEI Number Applied For ()	FEI Nun	nber Not Appl	licable ()	Certifica	te of Status Desired ()
Name and	l Address of C	urrent Registered Agent:		Name and	Address of	New Regi	stered Agent:
1201 HAYS TALLAHAS The above	S STREET SSEE, FL 323(ORPORATION SYSTEM, INC. O1 US submits this statement for the pu	ırpose o	f changing i	ts registered	office or re	egistered agent, or both,
SIGNATU	RE:						
		ic Signature of Registered Ager	nt			I	Date
Election Car	mpaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	V () HARVEY, RANI ONE CONAGRA OMAHA, NE 68	A DRIVE		Title: Name: Address: City-St-Zip:	V (, HARVEY, RAN ONE CONAGE OMAHA, NE (RA DRIVE) Addition
Title: Name: Address: City-St-Zip:	P () HECKMAN, GR ELEVEN CONA OMAHA, NE 68	GRA DRIVE		Title: Name: Address: City-St-Zip:	V () BECK, TRACE FIVE CONAGI OMAHA, NE (RA DRIVE) Addition
Title: Name: Address: City-St-Zip:	VD () KNOWLES, LE ONE CONAGRA OMAHA, NE 68	A DRIVE		Title: Name: Address: City-St-Zip:	KNOWLES, L ONE CONAGE	RA DRIVE) Addition
Title: Name: Address: City-St-Zip:	VTSD () MESSEL, SCO ONE CONAGRA OMAHA, NE 68	IT E A DRIVE		Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	V () NEPPL, JOHN N ELEVEN CONA OMAHA, NE 68	GRA DRIVE		Title: Name: Address: City-St-Zip:	V (. DOYLE, JAME FIVE CONAGI OMAHA, NE (RA DRIVE) Addition
Title: Name: Address: City-St-Zip:	D () GEHRING, JOH ONE CONAGRA OMAHA NE 68	A DRIVE		Title: Name: Address: City-St-Zip:	DV () GEHRING, JO ONE CONAGE OMAHA NE (RA DRIVE) Addition

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: RANDALL D. HARVEY VP 04/17/2009