

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007105

FILED
Feb 15, 2011
Secretary of State

Entity Name: NATIONAL ASSOCIATON FOR THE SPECIALTY FOOD TRADE, INC.

Current Principal Place of Business:

136 MADISON AVENUE
12TH FLOOR
NEW YORK, NY 10016

New Principal Place of Business:

Current Mailing Address:

136 MADISON AVENUE
12TH FLOOR
NEW YORK, NY 10016

New Mailing Address:

FEI Number: 13-1934121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: DESCHAIINE, DENNIS
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: VC
Name: SILVER, MIKE
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: DT
Name: MCBRIDE, SHAWN
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: DS
Name: BORBOLLA, BECKY
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: P
Name: DAW, ANN
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: VP
Name: TUCCILLO, MICHAEL A
Address: 136 MADISON AVENUE, 12TH FLOOR
City-St-Zip: NEW YORK, NY 10016

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL A. TUCCILLO

VP

02/15/2011

Electronic Signature of Signing Officer or Director

Date