

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007366

FILED
Apr 20, 2006
Secretary of State

Entity Name: PAMIDA HOLDING COMPANY, INC.

Current Principal Place of Business:

5200 TOWN CENTER CIRCLE, SUITE 470
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

5200 TOWN CENTER CIRCLE, SUITE 470
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 20-3940100

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TALARICO, GARY
Address: 375 PARK AVENUE, SUITE 1302
City-St-Zip: NEW YORK, NY 10152

Title: VP () Delete
Name: LODER, MARC J
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: KING, T. SCOTT
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: METZ, CHRIS
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: CALHOUN, KEVIN
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: NEIMARK, JASON
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPC (X) Change () Addition
Name: JOHNSON, LARRY
Address: 700 PILGRIM WAY PO BOX 19060
City-St-Zip: GREEN BAY, WI 54307

Title: DVP (X) Change () Addition
Name: KING, THOMAS S
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: DVAS (X) Change () Addition
Name: KUEHN, CASE
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VAS (X) Change () Addition
Name: MCCONVERY, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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: CASE KUEHN

Electronic Signature of Signing Officer or Director

DVAS

04/20/2006

_____ Date