

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001484

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** SCHWAN'S CONSUMER BRANDS NORTH AMERICA, INC.

**Current Principal Place of Business:**

8500 NORMANDALE LAKE BLVD, SUITE 2000  
BLOOMINGTON, MN 55437

**New Principal Place of Business:**

**Current Mailing Address:**

115 WEST COLLEGE DRIVE  
MARSHALL, MN 56258

**New Mailing Address:**

**FEI Number:** 58-1334880

**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: DPCE ( ) Delete  
Name: FLACK, GREGORY  
Address: 115 WEST COLLEGE DRIVE  
City-St-Zip: MARSHALL, MN 56258

Title: D ( ) Delete  
Name: KRUK, BERANDETTE M  
Address: 115 WEST COLLEGE DRIVE  
City-St-Zip: MARSHALL, MN 56258

Title: S ( ) Delete  
Name: SATTLER, BRIAN  
Address: 115 WEST COLLEGE DRIVE  
City-St-Zip: MARSHALL, MN 56258

Title: CFO ( ) Delete  
Name: NEITZKE, THOMAS  
Address: 8500 NORMANDALE LAKE BLVD, SUITE 2000  
City-St-Zip: BLOOMINGTON, MN 55437

Title: ASTS ( ) Delete  
Name: SIMONETT, MARK  
Address: 8500 NORMANDALE LAKE BLVD, SUITE 2000  
City-St-Zip: BLOOMINGTON, MN 55437

Title: ASTT ( ) Delete  
Name: DIRCKX, HEIDI  
Address: 115 WEST COLLEGE DRIVE  
City-St-Zip: MARSHALL, MN 56258

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCE (X) Change ( ) Addition  
Name: DALRYMPLE, MARK  
Address: 8500 NORMANDALE LAKE BLVD., SUITE 2000  
City-St-Zip: BLOOMINGTON, MN 55437

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

Title: SD (X) Change ( ) Addition  
Name: SATTLER, BRIAN R  
Address: 115 WEST COLLEGE DRIVE  
City-St-Zip: MARSHALL, MN 56258

Title: CFO (X) Change ( ) Addition  
Name: NAU, KATE  
Address: 8500 NORMANDALE LAKE BLVD, SUITE 2000  
City-St-Zip: BLOOMINGTON, MN 55437

Title: DIR (X) Change ( ) Addition  
Name: FLACK, GREG  
Address: 8500 NORMANDALE LAKE BLVD, SUITE 2000  
City-St-Zip: BLOOMINGTON, MN 55437

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

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: BRIAN R. SATTLER

SEC

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date