

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 26, 2011
Secretary of State

Entity Name: GM CEREALS OPERATIONS, INC.

Current Principal Place of Business:

NUMBER ONE GENERAL MILLS BOULEVARD
MINNEAPOLIS, MN 55426

New Principal Place of Business:

Current Mailing Address:

NUMBER ONE GENERAL MILLS BOULEVARD
MINNEAPOLIS, MN 55426

New Mailing Address:

FEI Number: 41-2050388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DVP
Name: MORRIS, GERALD J
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

Title: DVP
Name: CHURCH, JOHN R
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

Title: P
Name: FRIENDLY, IAN R
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

Title: DS
Name: GUNDERSON, TREVOR V
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

Title: DVP
Name: HARMENING, JEFFREY L
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

Title: AT
Name: BOHLKE, JOSEPH J
Address: NUMBER ONE GENERAL MILLS BOULEVARD
City-St-Zip: MINNEAPOLIS, MN 55426

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

SIGNATURE: JOSEPH J BOHLKE

AT

04/26/2011

Electronic Signature of Signing Officer or Director

Date