

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000136

1. Corporation Name

AMERISERV FOOD COMPANY

Principal Place of Business

14841 DALLAS PARKWAY
SUITE 100
DALLAS TX 75240
US

Mailing Address

14841 DALLAS PKWH
TAX DEPT
DALLAS TX 75240
US

2. Principal Place of Business

21 15305 Dallas Pkwy, #1600
Suite, Apt. #, etc.

2a. Mailing Address

26 15305 Dallas Pkwy, Tax Dept.
Suite, Apt. #, etc.

22 P.O. Box 9016

27 P.O. Box 9016; MS14A

City & State

City & State

23 Addison, TX

28 Addison, TX

Zip Country

Zip Country

24 75001-9016 25 USA

29 75001-9016 30 USA

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/10/1994

4. FEI Number

75-2296149

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME
HOLTEN, JOHN V
STREET ADDRESS
17975 W SARAH LANE
CITY-ST-ZIP
BROOKFIELD WI

TITLE S ☒ DELETE

NAME
ROGERS, DON
STREET ADDRESS
17975 W SARAH LANE
CITY-ST-ZIP
BROOKFIELD WI

TITLE P ☐ DELETE

NAME
MARSHALL, RAYMOND
STREET ADDRESS
14841 DALLAS PKWY
CITY-ST-ZIP
DALLAS TX 75240

TITLE D ☐ DELETE

NAME
EVANS, JOHN R
STREET ADDRESS
17975 W SARAH LANE
CITY-ST-ZIP
BROOKFIELD WI

TITLE V ☐ DELETE

NAME
SZLANDERBACH, S
STREET ADDRESS
14841 DALLAS PKWY
CITY-ST-ZIP
DALLAS TX 75240

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CEO ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
545 Steamboat Road
1.4 CITY-ST-ZIP
Greenwich, CT 06830

2.1 TITLE Vice President & Secretary ☐ Change ☒ Addition

2.2 NAME
Kevin J. Rogan
2.3 STREET ADDRESS
15305 Dallas Pkwy, Ste.1600
2.4 CITY-ST-ZIP
Addison, TX 75001-9016

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
15305 Dallas Pkwy, Ste.1600
3.4 CITY-ST-ZIP
Addison, TX 75001-9016

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
545 Steamboat Road
4.4 CITY-ST-ZIP
Greenwich, CT 06830

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
15305 Dallas Pkwy, Ste.1600
5.4 CITY-ST-ZIP
Addison, TX 75001-9016

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME
VP & CEO
Diana M. Moog
6.3 STREET ADDRESS
15305 Dallas Pkwy, Ste.1600
6.4 CITY-ST-ZIP
Addison, TX 75001-9016

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Raymond E. Marshall

4/29/99 972-364-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)