

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED

50 MAY -1 AM 8:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000006064 (9)

1. Corporation Name:

BEATRICE CHEESE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
ONE CONAGRA DRIVE, CC-361
OMAHA 68 68102-5001

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OMAHA 68 68102-5001

3. Date Incorporated or Qualified 11/28/1994 3a. Date of Last Report

4. FEI Number 13-3346703 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under S. 193.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 29 Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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 607.0542 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as 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 of Registered Agent or Registered Agent's Representative)

12. OFFICERS AND DIRECTORS

12.1 NAME	P	BURNS, ROBERT H
12.2 STREET ADDRESS		N 22 W 29084 HAPPY HOLLOW RD
12.3 CITY, ST., ZIP		PEWAUKEE WI 53072
12.4 NAME	V	DILL, JOHN J
12.5 STREET ADDRESS		326 SOUTH 124TH ST.
12.6 CITY, ST., ZIP		OMAHA NE 68154
12.7 NAME	V	THOMAS, L B
12.8 STREET ADDRESS		7813 PIERCE STREET
12.9 CITY, ST., ZIP		OMAHA NE 68124
12.10 NAME	AS	BADBERG, SUE
12.11 STREET ADDRESS		4629 CAPITOL AVENUE
12.12 CITY, ST., ZIP		OMAHA NE 68124
12.13 NAME	D	PETERS, DAVID T
12.14 STREET ADDRESS		206 S 121ST ST.
12.15 CITY, ST., ZIP		OMAHA NE 68154
12.16 NAME	D	TINDALL, JIM
12.17 STREET ADDRESS		9968 SPRING STREET
12.18 CITY, ST., ZIP		OMAHA NE 68124

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST., ZIP	
13.5 NAME	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST., ZIP	
13.9 NAME	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST., ZIP	
13.13 NAME	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST., ZIP	
13.17 NAME	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST., ZIP	

14. I, the undersigned, hereby certify that the information supplied with this filing is substantially accurate and true, and is true and correct for the information stated in this report. I further certify that the information included on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. 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 of this filing. I am not a director, officer, receiver, or trustee of the corporation.

SIGNATURE:

John J. Dill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John J. Dill

4/21/95