

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001299

FILED
Feb 10, 2011
Secretary of State

Entity Name: METROPOLITAN FOODS, INC.

Current Principal Place of Business:

536-D ST. ANDREWS ROAD
BOX 156
COLUMBIA, SC 29210

New Principal Place of Business:

Current Mailing Address:

3225 CUMBERLAND BLVD.
STE. 100
ATLANTA, GA 30339

New Mailing Address:

FEI Number: 58-1868009 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

OFFICERS AND DIRECTORS:

Title: D
Name: BOLCH, JR., CARL
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

Title: PCEO
Name: MCBRAYER, MAX JR.
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

Title: TCFO
Name: DUMBACHER, ROBERT J
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

Title: VPAS
Name: GURA, PHILIP P
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

Title: D
Name: LENKER, MAX
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

Title: D
Name: BOLCH, SUSAN B
Address: 3225 CUMBERLAND BLVD, STE. 100
City-St-Zip: ATLANTA, GA 30339

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: ROBERT J. DUMBACHER

CFO

02/10/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date