FILED May 15, 2001 8:00 am Secretary of State 05-15-2001 90003 001 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9600006763

1. Entity Name WHOLE FOODS MARKET GROUP, INC.									
Principal Place of Business		Mailing Address							
605 BROAD ST DURHAM NC 2770	5	601 N:LAMAR TAX DEPT SUITE:300 AUSTIN TX 78703 US							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.							
City & State		City & State							
Zip	Country	Zip	Country						

Principal Place of Business Mailing Address									
605 BROAD ST DURHAM NC 27705		601 N'LAMAR TAX DEPT SUITE 900 AUSTIN TX 78703 US		1					
2. Principal f	Place of Business	3. Mailing Address	<u>.</u>						
		· ·			C SMACINA CIIA COISE NISIL ABILI ENIII N	#	\$1131 18 BIG BI		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE	E IN THIS SP	ACE		
City & State		City & State		,	4. FEI Number 52-1711175			pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired		8.75 Add		
	6. Name and Address of Current Re	egistered Agent			7. Name and Address of New Re	gistered Ag	ent		
	Name	Name							
	ITOL CORPORATE SERVICES, INC.		Street A	ddress (P.C	(P.O. Box Number is Not Acceptable)				
	NORTH DUVAL STREET		0						
IALL	AHASSEE FL 32303								
			City			FL	Zip Code		
8. The above	named entity submits this statement for t								
	Signature, typed or printed name of registered agent and	I title if applicable. (NOTE: R	registered Agent signat	ture required whe	en reinstating)	DATE			
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2001 Make Check Payable		Fee will be \$5	550.00	10. Election Campaign Fina Trust Fund Contribution.			O May Be to Fees		
11.	OFFICERS AND DI	RECTORS	12.		ADDITIONS/CHANGES TO OFFIC	CERS AND D	IRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST FLANAGAN, GLENDA 6924 ROBERT DIXON AUSTIN TX 78749	⊅ □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Flanagan, Glenda 6924 Robert Dixon Austin TX 78449	☐ Delete	TITLE NAME STREET ADDRESS CHTY-ST-ZIP			C	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDBERG, AVRAM J 270 BEACON ST BOSTON MA 02178	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Ċ	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLO, A C 95 PROLOVICH ROAD COLRAIN MA 01340	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			C	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ELLERBE, LESLIE 2110 4TH STREET BOULDER CO 80302	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FONTAINE, LINDA 11410 CATALONIA DRIVE AUSTIN TX 78759	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Albert lane N.TX 78745	2	▼ Change	☐ Addition	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.