## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000001257

Entity Name: LEGAL SEA FOODS, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
ONE SEAFOOD WAY BOSTON, MA 02210					
Current Mailing Address:			New Mailing Address:		
ONE SEAFOOD WAY BOSTON, MA 02210					
FEI Number: (	04-2942234	FEI Number Applied For ( ) FEI Num	nber Not Appli	licable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
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:					
Election Occ		c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () I BERKOWITZ, RO 2 AVERY ST BOSTON, MA 02		Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition BERKOWITZ, ROGER S ONE SEAFOOD WAY BOSTON, MA 02210	
Title: Name: Address: City-St-Zip:	V () I SYNNOTT, MARI 60 TEMPLE ROA WELLESLEY, M	ND.	Title: Name: Address: City-St-Zip:	CTD (X) Change ( ) Addition BERKOWITZ, GEORGE H ONE SEAFOOD WAY BOSTON, MA 02210	
Title: Name: Address: City-St-Zip:	SD () I BERKOWITZ, HA UNIT 4411, 4 BA BOSTON, MA 02	TTERY WHARF	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CTD () I BERKOWITZ, GI UNIT 4411, 4 BA BOSTON, MA 02	TTERY WHARF	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition PENDERGAST, EDWARD H 21 KENMORE ROAD BELMONT, MA 02478	
Title: Name: Address: City-St-Zip:	D () I PENDERGAST, I 60 STATE STRE BOSTON, MA 02	ET, STE 700	Title: Name: Address: City-St-Zip:	ASV (X) Change ( ) Addition HELLER, RICHARD ONE SEAFOOD WAY BOSTON, MA 02210	
Title: Name: Address: City-St-Zip:	ASV (X) HELLER, RICHA 15 STANLEY RO NEWTON, MA 0	PAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROGER S. BERKOWITZ PD 04/13/2009