2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2011
Secretary of State

DOCUMENT# F98000005026

Entity Name: HALLMARK SWEET, INC.

Current Principal Place of Business:

49 PEARL STREET
ATTLEBOROUGH, MA 02703

New Principal Place of Business:

Current Mailing Address:

C/O COOKSON AMERICA, INC.
ONE COOKSON PL.ACE
PROVIDENCE, RI 02903

New Mailing Address:

FEI Number: 05-0401094 **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: DCP
Name: POWERS, RICHARD V
Address: 49 PEARL STREET
City-St-Zip: ATTLEBOROUGH, MA 02703

Title: DVC
Name: SMITH, RICHARD H
Address: 49 PEARL STREET
City-St-Zip: ATTLEBOROUGH, MA 02703

Title: AT
Name: MICHELETTI, ROBERT J
Address: 49 PEARL STREET
City-St-Zip: ATTLEBOROUGH, MA 02703

Title: VPT
Name: CARR, JAMES E
Address: 49 PEARL STREET
City-St-Zip: ATTLEBOROUGH, MA 02703

Title: DVP
Name: DEMICHELE, LAWRENCE
Address: 49 PEARL STREET
City-St-Zip: ATTLEBOROUGH, MA 02703

Title: AS
Name: GORGONE, WILLIAM S
Address: ONE COOKSON PLACE
City-St-Zip: PROVIDENCE, RI 02903

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: WILLIAM GORGONE AS 01/04/2011

Electronic Signature of Signing Officer or Director Date