2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# M02000003187

Entity Name: SCHWAN'S SHARED SERVICES, LLC

Current Principal Place of Business:

115 WEST COLLEGE DRIVE
MARSHALL, MN 56258

New Principal Place of Business:

Current Mailing Address:

115 WEST COLLEGE DRIVE
MARSHALL, MN 56258

New Mailing Address:

FEI Number: 81-0572771 **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

MANAGING MEMBERS/MANAGERS:

Title: MGRP ( ) Delete
Name: FLACK, GREGORY
Address: 115 WEST COLLEGE DRIVE
City-St-Zip: MARSHALL, MN 56258

Title: MGRC ( ) Delete
Name: KRUK, BERNADETTE M
Address: 115 W COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

Title: MGRS ( ) Delete
Name: SATTLER, BRIAN R
Address: 115 W COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MCFO (X) Change ( ) Addition
Name: KRUK, BERNADETTE M
Address: 115 W COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN R SATTLER SEC 04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date