

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 15, 2002 8:00 am**  
**Secretary of State**

05-15-2002 90093 038 \*\*\*150.00

DOCUMENT # *P 09904*  
1. Entity Name  
*MORAN FOODS, INC.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
*100 Corporate Office Dr.*  
Suite, Apt. #, etc.

3. Mailing Address  
*P.O. Box 990 - Tax Dept*  
Suite, Apt. #, etc.

City & State  
*Earth City, MO*

City & State  
*Minneapolis, MN*

Zip  
*63045* Country  
*USA*

Zip  
*55440* Country  
*USA*

4. FEI Number  
*43-1283296*

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
*C-T Corporation System*

Street Address (P.O. Box Number is Not Acceptable)  
*1200 S. Pine Island Rd.*

City  
*Plantation* FL Zip Code  
*33324*

8. 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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<i>P/D</i>	<i>William M. Moran, Jr.</i>	<i>100 Corporate Office Drive</i>	<i>Earth City, MO 63045</i>				
<i>V/S</i>	<i>John P. Breedlove</i>	<i>11840 Valley View Rd.</i>	<i>Eden Prairie, MN 55344</i>				
<i>V/D</i>	<i>David L. Boehner</i>	<i>11840 Valley View Rd.</i>	<i>Eden Prairie, MN 55344</i>				
<i>V/IAT</i>	<i>Frank J. O'Keefe</i>	<i>11840 Valley View Rd</i>	<i>Eden Prairie, MN 55344</i>				

**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Frank O'Keefe* *Frank J. O'Keefe* 4-26-02 (952) 828-4371  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)