


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P09904
1. Entity Name
MORAN FOODS, INC.



Principal Place of Business
**100 CORPORATE OFFICE DRIVE
EARTH CITY, MO 63045**

Mailing Address
**P.O. BOX 990- TAX DEPT
MINNEAPOLIS, MN 55440 US**

DO NOT WRITE IN THIS SPACE



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number
43-1283296

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

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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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE: PD
NAME: MORAN, WILLIAM M. JR.
STREET ADDRESS: 100 CORPORATE OFFICE DRIVE
CITY-ST-ZIP: EARTH CITY, MO 63045

TITLE: VPS
NAME: BREEDLOVE, JOHN P.
STREET ADDRESS: 11840 VALLEY VIEW ROAD
CITY-ST-ZIP: EDEN PRAIRIE, MN 55344

TITLE: VCD
NAME: BOEHNEN, DAVID L
STREET ADDRESS: 11840 VALLEY VIEW ROAD
CITY-ST-ZIP: EDEN PRAIRIE, MN 55344

TITLE: VP
NAME: STOFFEL, JAMES L
STREET ADDRESS: 11840 VALLEY VIEW ROAD
CITY-ST-ZIP: EDEN PRAIRIE, MN 55344

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES L. STOFFEL Date: 4/8/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR