

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 28 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

FOOD LION, INC.

P10668

Principal Place of Business 2110 EXECUTIVE DRIVE PO BOX 1330 SALISBURY NC 28145	Mailing Address 2110 EXECUTIVE DRIVE PO BOX 1330 SALISBURY NC 28145
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 CORPORATE TAX DEPT Suits, Apt. #, etc. 22 2110 EXECUTIVE DRIVE City & State 23 SALISBURY NC Zip 24 28145 Country 25 US	2a. Mailing Address 26 CORPORATE TAX DEPT Suits, Apt. #, etc. 27 2110 EXECUTIVE DRIVE City & State 28 SALISBURY NC Zip 29 28145 Country 30 US	3. Date Incorporated or Qualified 07/03/86	4. FEI Number 56-0660192 Applied For <input checked="" type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP D PIERRE-OLIVER BECKER 53, RUE OSSEGHEM 1080 BRUXELLES BE [X] DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP SEE ATTACHED LIST <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP CEO TOM E SMITH 355 CHANDLER RD SALISBURY NC [X] DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP T MICHAEL PRICE 17312 COVE VIEW CT CORNELIUS NC [X] DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP S R W MCCANLESS 244 CONFEDERATE AVE SALISBURY NC [X] DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP D BERNARD W FRANKLIN 1315 OAKWOOD AVE RALEIGH NC [X] DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP D JACQUELINE K COLLAMORE 5206 NORWAY DR CHEVY CHASE MD [X] DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 900002539513 -05/28/98--01085--021 ***150.00

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Richard James, Treasurer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-28-98 704-633-8250

## **Officers - FOOD LION**

**AS OF**

**April-98**

<b>TITLE</b>	<b>NAME</b>	<b>ADDRESS</b>
President CEO	Tom Smith	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President COO	Joseph C Hall	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Merchandising	Pamela K. Kohn	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Administration CAO / Secretary	R. William McCanless	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Marketing	Jay J. Abraham	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Information Technology	A. Edward Benner, Jr.	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Procurement	Robert J. Brunory	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Southern Div	Charles C. Buckley	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Distribution	Larry A. Cooper	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Northern Div	W. Bruce Dawson	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145

Vice President Real Estate	Keith M Gehl	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Finance / CFO	Laura C. Kendall	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Human Resources	Eugene R. McKinley	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Vice President Legal Affairs	Lester C. Nail	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Treasurer	Richard James	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Asst. Treasurer	Judy G. Crowell	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145
Asst. Secretary	Glenda L. Klutzz	2110 Executive Drive P.O. Box 1330 Salisbury, NC 28145