FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P11199** **(7)**

1. Corporation Name
THE HAAGEN-DAZS COMPANY, INC.

Principal Place of Business	Mailing Address
% THE PILLSBURY COMPANY - TAX DEPARTMENT THE PILLSBURY CENTER MINNEAPOLIS MN 55402	% THE PILLSBURY COMPANY - TAX DEPARTMENT THE PILLSBURY CENTER MINNEAPOLIS MN 55402

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **08/21/1986**
3a. Date of Last Report: **04/18/1994**

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / (27)
City & State (23) / (28)
Zip (24) Country (25) / Zip (29) Country (30)

4. FEI Number: **22-2472987** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

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

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	PAXTON, MICHAEL J.	12 NAME		
STREET ADDRESS	200 SOUTH 6T STREET	13 STREET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN	14 CITY-ST-ZIP		
TITLE	VS	21 TITLE		☐ Change ☐ Addition
NAME	RUSSETH, RICHARD Q.	22 NAME		
STREET ADDRESS	200 SOUTH 6TH STREET	23 STREET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN	24 CITY-ST-ZIP		
TITLE	TV	31 TITLE	VT	XX Change ☐ Addition
NAME	HUMPHREY, JAMES H.	32 NAME	Nowell, Lionel L.	
STREET ADDRESS	GLENPOINTE CENTER EAST	33 STREET ADDRESS	Glenpointe Center East	
CITY-ST-ZIP	TEANECK NJ	34 CITY-ST-ZIP	Teaneck, NJ 07666	
TITLE	D	41 TITLE	D	XX Change ☐ Addition
NAME	MARTIN, IAN A.	42 NAME	Walsh, Paul S.	
STREET ADDRESS	200 SOUTH 6TH STREET	43 STREET ADDRESS	200 South 6TH Street	
CITY-ST-ZIP	MINNEAPOLIS MN	44 CITY-ST-ZIP	Minneapolis, MN 55402	
TITLE	AST	51 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, LESLIE R.	52 NAME		
STREET ADDRESS	200 S. 6TH STREET	53 STREET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN	54 CITY-ST-ZIP		
TITLE	V	61 TITLE	V	XX Change ☐ Addition
NAME	MCGRATH, ANTHONY G.	62 NAME	Marino, Donna	
STREET ADDRESS	GLENPOINT CENTER EAST	63 STREET ADDRESS	Glenpointe Center East	
CITY-ST-ZIP	TEANECK NJ	64 CITY-ST-ZIP	Teaneck, NJ 07666	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Leslie R Johnson, Asst. Sect. 4/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0407343 FP