

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15934

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** ADAMS PACKING ASSOCIATION, INC.

**Current Principal Place of Business:**

1155 PERIMETER CENTER W STE 1200  
ATLANTA, GA 30338 US

**New Principal Place of Business:**

ONE DAVE THOMAS BLVD.  
DUBIN, OH 43017 US

**Current Mailing Address:**

1155 PERIMETER CENTER W STE 1200  
ATLANTA, GA 30338 US

**New Mailing Address:**

ONE DAVE THOMAS BLVD.  
DUBIN, OH 43017 US

**FEI Number:** 59-2772053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BROLICK, EMIL J  
Address: ONE DAVE THOMAS BLVD.  
City-St-Zip: DUBLIN, OH 43017

Title: CFOD  
Name: HARE, STEPHEN E  
Address: ONE DAVE THOMAS BLVD.  
City-St-Zip: DUBLIN, OH 43017

Title: ASD  
Name: KLEIN, DANA  
Address: ONE DAVE THOMAS BLVD.  
City-St-Zip: DUBLIN, OH 43017

Title: VPAT  
Name: WAUGH, GAVIN P  
Address: ONE DAVE THOMAS BLVD.  
City-St-Zip: DUBLIN, OH 43017

Title: T  
Name: COLLINS, DANIEL T  
Address: ONE DAVE THOMAS BLVD.  
City-St-Zip: DUBLIN, OH 43085

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DANA KLEIN

AS

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date