

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Tandra B. Murrain
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

50 MAY -1 PM 3:07

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P20454 (5)

1. Corporation Name

OSCAR MAYER FOODS CORPORATION

Principal Place of Business

Mailing Address

**THE CORPORATION TRUST COMPANY
3 THREE LAKES DR
NORTHFIELD IL 60093
US**

**C/O THE CORPORATION TRUST CO/TAX DEPT NF15
3 LAKES DR
NORTHFIELD IL 60093
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/10/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

22-2354725

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**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Three Lakes Drive

26 Three Lakes Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Tax Dept. N3E

27 Tax Dept. NF15

City & State

City & State

23 Northfield, IL

28 Northfield, IL

Zip

Country

Zip

Country

24 60093

25

29 60093

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

Signature typed or printed name of registered agent and fee taker

NOTE: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VS**
NAME **RYAN, THOMAS J.**
STREET ADDRESS **910 MAYER AVENUE**
CITY - ST - ZIP **MADISON WI**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **Delete**
1.4 CITY - ST - ZIP

TITLE **V**
NAME **DRANE, ROBERT E**
STREET ADDRESS **910 MAYER AVENUE**
CITY - ST - ZIP **MADISON WI**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **AS**
NAME **HERST, ROBERT L**
STREET ADDRESS **3 LAKES DR**
CITY - ST - ZIP **NORTHFIELD IL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **V**
NAME **STOCKTON, BRYAN G.**
STREET ADDRESS **910 MAYER AVENUE**
CITY - ST - ZIP **MADISON WI**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **P**
NAME **ECKERT, ROBERT A**
STREET ADDRESS **910 MAYER AVENUE**
CITY - ST - ZIP **MADISON WI**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **V**
NAME **SEARER, RICHARD G.**
STREET ADDRESS **910 MAYER AVENUE**
CITY - ST - ZIP **MADISON WI**

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS **Delete**
6.4 CITY - ST - ZIP

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 110.07(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: *Deborah L. Galvin* Deborah L. Galvin

4-25-95

708-646-2053

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

120454

OSCAR MAYER FOODS CORPORATION **OFFICERS**

<u>NAME</u>	<u>OFFICE ADDRESS</u>
Robert A. Eckert President	910 Mayer Ave. Madison, WI 53704
Ronald P. Wauters Vice President	910 Mayer Ave. Madison, WI 53704
Robert E. Drane Vice President	910 Mayer Ave. Madison, WI 53704
Phyllis Lovrien Vice President	910 Mayer Ave. Madison, WI 53704
Stephen Shanesy Vice President	920 Mayer Ave. Madison, WI 53704
Joseph T. Harcarik Secretary	910 Mayer Ave. Madison, WI 53704
Roman a. Maier Vice President	910 Mayer Ave. Madison, WI 53704
Harold F. Mayer Vice President	910 Mayer Ave. Madison, WI 53704
Bryan G. Stockton Vice President	910 Mayer Ave. Madison, WI 53704
Valentin Fernández VP, Finance & Strategy	910 Mayer Ave. Madison, WI 53704
Kathleen Kelly Spear VP & Asst. Secretary	Three Lakes Drive Northfield, IL 60093
Raymond J. Herrmann VP & Asst. Secretary	Three Lakes Drive Northfield, IL 60093
John F. Mowrer VP, Treasurer & Controller	Three Lakes Drive Northfield, IL 60093
Michael D. Balster Asst. Controller	Three Lakes Drive Northfield, IL 60093

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Charles J. Hunn
Vice President

910 Mayer Ave.
Madison, WI 53704

Robert L. Herst
VP & Asst. Secretary

Three Lakes Drive
Northfield, IL 60093

Donna Bunch
Asst. Secretary

910 Mayer Ave.
Madison, WI 53704

Randy Dickson
Asst. Secretary

910 Mayer Ave.
Madison, WI 53704

Deborah L. Galvin
Asst. Secretary

Three Lakes Drive
Northfield, IL 60093

DIRECTORS

Kathleen Kelly Spear

Three Lakes Drive
Northfield, IL 60093

Robert A. Eckert

910 Mayer Ave.
Madison, WI 53704

John F. Mowrer

Three Lakes Drive
Northfield, IL 60093