2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20758

Entity Name: KASH N' KARRY FOOD STORES, INC.

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: CORPORATE TAX DEPT. 2110 EXECUTIVE DRIVE SALISBURY, NC 28145 **Current Mailing Address: New Mailing Address:** HANNAFORD/GOVERNMENT RELATIONS 145 PLEASANT HILL ROAD SCARBOROUGH, ME 04074 US FEI Number: 95-4161591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition HODGE, RONALD C Name: Name: 145 PLEASANT HILL ROAD Address: Address: City-St-Zip: SCARBOROUGH, ME 04074 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: DICKINSON, EMILY D Name: 145 PLEASANT HILL ROAD Address: Address: SCARBOROUGH, ME 04074 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BROADER, SHELLEY G Name: Name: 3801 SUGAR PALM DRIVE Address: Address: TAMPA, FL 33619 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition EVANS, G.LINN Name: Name: Address: 2110 EXECUTIVE DR Address: City-St-Zip: SALISBURY, NC 28145 US City-St-Zip: Title: Title: () Delete () Change () Addition BOWNE, GARRETT D IV Name: Name: 145 PLEASANT HILL ROAD Address: Address: City-St-Zip: SCARBOROUGH, ME 04074 US City-St-Zip: Title: () Delete Title: () Change () Addition CRAIG, GREER S Name: Name: 3801 SUGAR PALM DRIVE Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33619 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EMILY D. DICKINSON AS 01/30/2006