

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091713

Entity Name: FL FOOD LION, INC.

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

2110 EXECUTIVE DRIVE  
CORPORATE TAX DEPT.  
SALISBURY, NC 28145

## New Principal Place of Business:

## Current Mailing Address:

2110 EXECUTIVE DRIVE  
CORPORATE TAX DEPT.  
SALISBURY, NC 28145

## New Mailing Address:

FEI Number: 56-2051565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

00RPORTION 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete  
Name: ANICETTI, RICHARD A  
Address: 2110 EXECUTIVE DR  
City-St-Zip: SALISBURY, NC 28147

Title: DIR ( ) Delete  
Name: DIXON, R. GLENN  
Address: 2110 EXECUTIVE DRIVE  
City-St-Zip: SALISBURY, NC 28147

Title: DIR ( ) Delete  
Name: EVANS, G LINN  
Address: 2110 EXECUTIVE DRIVE  
City-St-Zip: SALISBURY, NC 28147

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR (X) Change ( ) Addition  
Name: PENNICK, DERICK  
Address: 2110 EXECUTIVE DRIVE  
City-St-Zip: SALISBURY, NC 28147

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: G. LINN EVANS

DIR

04/17/2009

Electronic Signature of Signing Officer or Director

Date