

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005625

Entity Name: GORDON FOOD SERVICE, INC.**Current Principal Place of Business:**1300 GEZON PARKWAY SW
WYOMING, MI 49509**Current Mailing Address:**PO BOX 2992
GRAND RAPIDS, MI 49501 US**FEI Number: 38-1249848****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name GORDON, DANIEL A
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title VC, TREASURER, DIRECTOR
Name GORDON, JAMES D
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title PRESIDENT, CEO, DIRECTOR
Name WOLOWSKI, RICHARD J
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title D
Name WHITE, B.JOSEPH
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title D
Name SCHMIDT, TRACY G
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title D
Name GEIER, FRANK J
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title D
Name ORDWAY, P.CHRISTOPHER
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Title SECRETARY
Name CIESLAK, ALISHA
Address 1300 GEZON PARKWAY SW
City-State-Zip: WYOMING MI 49509

Continues on page 2

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: JEFFREY B MADDIX**ASST TREASURER****01/18/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. TREASURER
Name	MADDOX, JEFFREY B
Address	1300 GEZON PARKWAY SW
City-State-Zip:	WYOMING MI 49509