



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401 222 3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

1. ID No. 139869		2. Exact name of the limited liability company The Stop & Shop Supermarket Company LLC			
3. State of Formation Delaware		4. Brief description of the character of the business which is actually conducted in Rhode Island Supermarket Company			
5. Principal office address 1385 Hancock Street		City Quincy	State MA	Zip 02169-5103	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Lisa Szalaji			Contact Title Director of Business Law		
Street Address 1385 Hancock Street		City Quincy	State MA	Zip 02169-5103	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52					
Manager Name José B. Alvarez		Manager Name James K. Rojas			
Street Address 1385 Hancock Street		Street Address 1385 Hancock Street			
City Quincy	State MA	Zip 02169-5103	City Quincy	State MA	Zip 02169-5103
Manager Name Thomas A. Hippler		Manager Name			
Street Address 1385 Hancock Street		Street Address			
City Quincy	State MA	Zip 02169-5103	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11					
Agent Name Corporation Service Company			Address		
Address 222 Jefferson Boulevard, Suite 200		City Warwick		Zip 02888	

RECEIVED
 2007 SEP 14 PM 12:00
 PROVISIONAL
 FILE
 139869

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b)

139869

File Date	FILED
Check No.	SEP 14 2007
By:	By: <i>[Signature]</i> 36870
FOR SECRETARY OF STATE USE ONLY	

12:00

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct

[Signature] 9/6/07
 Signature of Authorized Person Date
 Steven F. Rowell, Assistant Secretary
 Print or Type Name of Authorized Person