



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02905-1555
801.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 70284		2. Name of Corporation McLANE/MID-ATLANTIC, INC.			
3. Street Address Principal Business Office 4747 MCLANE PARKWAY		City TEMPLE		State TX	Zip 76504
4. Business Phone No. (254) 771-7500		5. State of Incorporation TEXAS			6. SIC Code 422400
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE GROCERY DISTRIBUTION					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM G. ROSIER			Vice President Name NONE		
Street Address 4747 MCLANE PARKWAY			Street Address		
City TEMPLE	State TX	Zip 76504	City	State	Zip
Secretary Name LEN MEWHINNEY			Treasurer Name KEVIN J. KOCH		
Street Address 4747 MCLANE PARKWAY			Street Address 4747 MCLANE PARKWAY		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name WILLIAM G. ROSIER			Director Name TERRY MCELROY		
Street Address 4747 MCLANE PARKWAY			Street Address 4747 MCLANE PARKWAY		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
Director Name JAMES L. KENT			Director Name NONE		
Street Address 4747 MCLANE PARKWAY			Street Address		
City TEMPLE	State TX	Zip 76504	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
1,000,000 COMM \$.10 PAR VALUE			10,000	COMMON	\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



70284

File Date 1-20-05
3933725
Check No. 2
By _____

FOR SECRETARY OF STATE USE ONLY

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.

Kevin J. Koch 1/7/05
Signature of Officer Date
KEVIN J. KOCH
Print or Type Name of Officer
TREASURER
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 70284		2. Name of Corporation McLANE/MID-ATLANTIC, INC.			
3. Street Address Principal Business Office 4747 McLane Parkway		City Temple		State TX	Zip 76504
4. Business Phone No. 254/771-7500		5. State of Incorporation TEXAS			6. SIC Code 422400
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE GROCERY DISTRIBUTION					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William G. Rosier			Vice President Name None		
Street Address 4747 McLane Parkway			Street Address		
City Temple	State TX	Zip 76504	City	State	Zip
Secretary Name Len Mewhinney			Treasurer Name Kevin J. Koch		
Street Address 4747 McLane Parkway			Street Address 4747 McLane Parkway		
City Temple	State TX	Zip 76504	City Temple	State TX	Zip 76504
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William G. Rosier			Director Name Terry McElroy		
Street Address 4747 McLane Parkway			Street Address 4747 McLane Parkway		
City Temple	State TX	Zip 76504	City Temple	State TX	Zip 76504
Director Name James L. Kent			Director Name None		
Street Address 4747 McLane Parkway			Street Address		
City Temple	State TX	Zip 76504	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000,000 COMM \$0.10 PAR VALUE			10,000	common	\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date 2/20/04
Check No. 37621916
By: SC

FOR SECRETARY OF STATE USE ONLY

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.

Kevin J. Koch 2/15/04
Signature of Officer Date

Kevin J. Koch
Print or Type Name of Officer

Treasurer
Title of Officer



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No

70284

2. Name of Corporation

McLANE/MID-ATLANTIC, INC.

3. Street Address Principal Business Office

4747 McLane Parkway

City

Temple

State

TX

Zip

76504

4. Business Phone No.

(254) 771-7500

5. State of Incorporation

TEXAS

6. SIC Code

422400

7. Brief Description of the Character of Business Conducted in Rhode Island

Wholesale Grocery Distribution

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

William G. Rosier

Vice President Name

None

Street Address

4747 McLane Parkway

Street Address

City

Temple

State

TX

Zip

76504

City

State

Zip

Secretary Name

Len Mewhinney

Treasurer Name

Kevin J. Koch

Street Address

4747 McLane Parkway

Street Address

4747 McLane Parkway

City

Temple

State

TX

Zip

76504

City

State

Zip

Temple

TX

76504

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

William G. Rosier

Director Name

Terry McElroy

Street Address

4747 McLane Parkway

Street Address

4747 McLane Parkway

City

Temple

State

TX

Zip

76504

City

State

Zip

Temple

TX

76504

Director Name

James L. Kent

Director Name

None

Street Address

4747 McLane Parkway

Street Address

City

Temple

State

TX

Zip

76504

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000,000 COMM \$.10 PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

10,000

Common

\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date: 2/20/03

Check No.: 03191953

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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 of Officer: [Signature] Date: 2/11/03

Print or Type Name of Officer: Kevin J. Koch

Title of Officer: Treasurer

Form 630 12/02



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

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70284** 2. Name of Corporation **McLANE/MID-ATLANTIC, INC.**

3. Street Address Principal Business Office **U.S. 17, West I-95** City **Falmouth** State **VA** Zip **22403**
4. Business Phone No. **(254) 771-7500** 5. State of Incorporation **TEXAS** 6. SIC Code **422400**

7. Brief Description of the Character of Business Conducted in Rhode Island
Wholesale Grocery Distribution

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name William G. Rosier	Vice President Name
Street Address	Street Address
4747 McLane Parkway	
City Temple State TX Zip 76504	City State Zip
Secretary Name Len Mewhinney	Treasurer Name Kevin J. Koch
Street Address	Street Address
4747 McLane Parkway	4747 McLane Parkway
City Temple State TX Zip 76504	City Temple State TX Zip 76504

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name William G. Rosier	Director Name Terry McElroy
Street Address	Street Address
4747 McLane Parkway	4747 McLane Parkway
City Temple State TX Zip 76504	City Temple State TX Zip 76504
Director Name James L. Kent	
Street Address	
4747 McLane Parkway	
City Temple State TX Zip 76504	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
1,000,000 COMM \$.10 PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
10,000 Common \$.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date: 2/4/02
Check No.: 03758061
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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] 1/25/2002
Signature of Officer Date
Kevin J. Koch
Print or Type Name of Officer
Treasurer
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 70284		2. Name of Corporation MCLANE/MID-ATLANTIC, INC.			
3. Street Address Principal Business Office U.S. 17, WEST I-95			City FALMOUTH	State VA	Zip 22403
4. Business Phone No. (254) 771-7500		5. State of Incorporation TEXAS			6. SIC Code 422400
7. Brief Description of the Character of Business Conducted in Rhode Island WHOLESALE GROCERY DISTRIBUTION					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM G. ROSIER			Vice President Name R.D. HARGER		
Street Address 4747 MCLANE PARKWAY			Street Address 4747 MCLANE PARKWAY		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
Secretary Name LEN MEWHINNEY			Treasurer Name KEVIN J. KOCH		
Street Address 4747 MCLANE PARKWAY			Street Address 4747 MCLANE PARKWAY		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name WILLIAM G. ROSIER			Director Name R.D. HARGER		
Street Address 4747 MCLANE PARKWAY			Street Address 76504		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
Director Name TERRY MCELROY			Director Name R.D. HARGER		
Street Address 4747 MCLANE PARKWAY			Street Address 76504		
City TEMPLE	State TX	Zip 76504	City TEMPLE	State TX	Zip 76504
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000,000	COMMON	\$0.10	10,000	COMMON	\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date: 3/5

Check No.: 3595092

By: 2

FOR SECRETARY OF STATE USE ONLY

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 of Officer Caroline Mann Date 02/21/01

Print or Type Name of Officer

CAROLINE MANN

Title of Officer

ASST. TREASURER



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70284** 2. Name of Corporation **McLANE/MID-ATLANTIC, INC.**
3. Street Address Principal Business Office **U.S. 17, West I-95** City **Falmouth** State **VA** Zip **22403**
4. Business Phone No. **(254) 771-7500** 5. State of Incorporation **TEXAS** 6. SIC Code **5140**

7. Brief Description of the Character of Business Conducted in Rhode Island
Wholesale Grocery Distribution

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **William G. Rosier**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

Secretary Name **Len Mewhinney**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

Vice President Name **R.D. Harger**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

Treasurer Name **Kevin J. Koch**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **William G. Rosier**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

Director Name **Terry McElroy**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

Director Name **R.D. Harger**
Street Address **4747 McLane Pkwy**
City **Temple** State **TX** Zip **76504**

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
1,000,000	common	\$0.10

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
10,000	common	\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date: 2-1-00

Check No.: 3365362

By: AMF

FOR SECRETARY OF STATE USE ONLY

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 of Officer Kevin J. Koch Date 01/18/00

Print or Type Name of Officer Kevin J. Koch

Title of Officer Treasurer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 70284		2. Name of Corporation McLANE/MID-ATLANTIC, INC.		
3. Street Address Principal Business Office U.S. 17, West of I-95		City Falmouth	State VA	Zip 22403
4. Business Phone No. (254) 771-7500		5. State of Incorporation TEXAS		6. SIC Code 5140
7. Brief Description of the Character of Business Conducted in Rhode Island Wholesale Grocery Distribution				
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name William G. Rosier		Vice President Name R.D. Harger		
Street Address 4747 McLane Parkway		Street Address 4747 McLane Parkway		
City Temple	State Tx	City Temple	State TX	Zip 76504
Secretary Name Len Mewhinney		Treasurer Name Kevin Koch		
Street Address 4747 McLane Parkway		Street Address 4747 McLane Parkway		
City Temple	State TX	City Temple	State TX	Zip 76504
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name William G. Rosier		Director Name R.D. Harger		
Street Address 4747 McLane Parkway		Street Address 4747 McLane Parkway		
City Temple	State TX	City Temple	State TX	Zip 76504
Director Name Terry McElroy		Director Name		
Street Address 4747 McLane Parkway		Street Address		
City Temple	State TX	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)				
AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value		
1,000,000	common	\$0.10		
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)				
ISSUED SHARES				
Number of Shares	Class/Series	Par Value		
10,000	common	\$0.10		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 3.1.99

Check No.: 3128740

By: llp

FOR SECRETARY OF STATE USE ONLY

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 of Officer Kevin Koch Date 2/16/99

Print or Type Name of Officer
Kevin Koch
Treasurer

Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

70284

2. Name of Corporation

McLANE/MID-ATLANTIC, INC.

3. Street Address Principal Business Office

City

State

Zip

U. S. 17, West of I-95

Falmouth

VA

22403

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(254) 771-7500

TEXAS

5140

7. Brief Description of the Character of Business Conducted in Rhode Island

Wholesale Grocery Distribution

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Vice President Name

William G. Rosier

R. D. Harger

Street Address

Street Address

4747 McLane Parkway

4747 McLane Parkway

City State Zip
Temple TX 76504

City State Zip
Temple TX 76504

Secretary Name

Treasurer Name

Len Mewhinney

Kevin Koch

Street Address

Street Address

4747 McLane Parkway

4747 McLane Parkway

City State Zip
Temple TX 76504

City State Zip
Temple TX 76504

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Director Name

William G. Rosier

R. D. Harger

Street Address

Street Address

4747 McLane Parkway

4747 McLane Parkway

City State Zip
Temple TX 76504

City State Zip
Temple TX 76504

Director Name

Director Name

Terry McElroy

Street Address

Street Address

4747 McLane Parkway

City State Zip
Temple TX 76504

City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

1,000,000

common

\$0.10

10,000

common

\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date: 1-30-98

Check No.: 3113767

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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] 1/23/98
Signature of Officer Date

Kevin Koch
Print or Type Name of Officer

Treasurer
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70284** 2. Name of Corporation **McLANE/MID-ATLANTIC, INC.**

3. Street Address Principal Business Office
U. S. 17, West of I-95

City **Falmouth**

State **VA**

Zip **22403**

4. Business Phone No.
(817) 771-7500

5. State of Incorporation
TEXAS

6. SIC Code
5140

7. Brief Description of the Character of Business Conducted in Rhode Island

Wholesale Grocery Distribution

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

William G. Rosier

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Secretary Name

Len Mewhinney

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Vice President Name

R. D. Harger

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Treasurer Name

Kevin J. Koch

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

William G. Rosier

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Director Name

Terry McElroy

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Director Name

R. D. Harger

Street Address

4747 McLane Parkway

City **Temple** State **TX** Zip **76504**

Director Name

Street Address

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000,000	Common	\$0.10

ISSUED SHARES

Number of Shares	Class/Series	Par Value
10,000	Common	\$0.10

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 2 8 4 *

File Date: **2.08.97**

Check No.: **3586818**

By: **10P/1997**

FOR SECRETARY OF STATE USE ONLY

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.

Kevin J. Koch 2/19/97
Signature of Officer Date

Kevin J. Koch
Print or Type Name of Officer

Treasurer
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID / NO 70284		2. NAME OF CORPORATION McLANE/MID-ATLANTIC, INC.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE U.S. 17, West of I-95		CITY Falmouth	STATE VA
4. BUSINESS PHONE NO. (817) 771-7500		5. STATE OF INCORPORATION TEXAS	6. ZIP CODE 22403
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Wholesale Grocery Distribution		8. SIC CODE 5140	

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME William G. Rosier			VICE PRESIDENT NAME R.D. Harger		
STREET ADDRESS 4747 McLane Parkway			STREET ADDRESS 4747 McLane Parkway		
CITY Temple	STATE TX	ZIP CODE 76504	CITY Temple	STATE TX	ZIP CODE 76504
SECRETARY NAME Michael P. Puryear			TREASURER NAME Kevin J. Koch		
STREET ADDRESS 4747 McLane Parkway			STREET ADDRESS 4747 McLane Parkway		
CITY Temple	STATE TX	ZIP CODE 76504	CITY Temple	STATE TX	ZIP CODE 76504

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME William G. Rosier			DIRECTOR NAME R.D. Harger		
STREET ADDRESS 4747 McLane Parkway			STREET ADDRESS 4747 McLane Parkway		
CITY Temple	STATE TX	ZIP CODE 76504	CITY Temple	STATE TX	ZIP CODE 76504
DIRECTOR NAME Terry McElroy			DIRECTOR NAME		
STREET ADDRESS 4747 McLane Parkway			STREET ADDRESS		
CITY Temple	STATE TX	ZIP CODE 76504	CITY	STATE	ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000,000	Common	\$0.10	10,000	Common	\$0.10

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

File Date:

3/4/96

Check No:

03329735

By:

cc / up

For Secretary of State Use Only

Signature of Officer

Kevin J. Koch

Print or Type Name of Officer

Treasurer

Title of Officer

2/28/96

Date



ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0070284 Annual Report for the year: 1995

Name of Corporation: MCLANE/MID-ATLANTIC, INC.

Business entity organized under the laws of the State of: Texas Business Entity is (check one):

For foreign entity, address and telephone number of principal office: ☒ Business Corporation (See RIGL Chapter 7-1.1)

P.O. Box 6115 ☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Temple, TX 76503-6115

Phone: (817) 771-7500 Brief statement of the character of business conducted in Rhode Island:

Wholesale Grocery Distribution

Address and telephone of the principal office of business entity in Rhode

Island (Provide street address - Not P.O. Box):

None

Phone: ()

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>William G. Rosier</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>
VICE PRESIDENT <u>R.D. Harger</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>
SECRETARY <u>Michael P. Puryear</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>
TREASURER <u>Kevin J. Koch</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Drayton McLane, Jr.</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>
<u>William G. Rosier</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>
<u>R.D. Harger</u>	<u>4747 McLane Parkway</u>	<u>Temple, TX</u>	<u>76504</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series	Number of Shares	Class / Series
<u>1,000,000</u>	<u>Common</u>	<u>10,000</u>	<u>Common</u>

Date February 21 19 95 By: Kevin J. Koch

PRINT OR TYPE NAME OF OFFICER SIGNING Treasurer

Form 31 1/95 TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

CT CORPORATION SYSTEM
123 DYER STREET
PROVIDENCE RI 02903

FILED

FEB 27 1995

By [Signature]
01811583

McLane/Mid-Atlantic, Inc.

Annual Report

3/1/95

Additional Officers

Name	Title	Address
Caroline R. Mann	Assistant Treasurer	4747 McLane Parkway, Temple, TX 76504
Donald R. Graves	Assistant Secretary	4747 McLane Parkway, Temple, TX 76504

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept 1 - Nov. 1
CORP Jan 1 - March 1

Corporate ID: 0070284 Annual Report for the year: 1994

Name of Business Entity: MC LANE/MID-ATLANTIC, INC.

Business entity organized under the laws of the State of Texas

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

P. O. Box 6115

Temple, TX 76503-6115

Phone: 817-771-7500

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box).

NONE

Phone: ()

Business Entity is (check one)

- ☒ Business Corporation (See RIGL Chapter 7-1.1)
☐ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Charles Sulak

Senior Tax Analyst

P. O. Box 6115

Temple, TX 76503-6115

Brief statement of the character of business conducted in Rhode Island
Wholesale Grocery Distribution

Date of Organization: 09/25/92

Date of Qualification to do business in Rhode Island (if foreign entity):
11/09/92

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input checked="" type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) Joseph S. Hardin, Jr.	4747 McLane Parkway	Temple, TX	76504
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) R. D. Harger	4747 McLane Parkway	Temple, TX	76504
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) Michael P. Puryear	4747 McLane Parkway	Temple, TX	76504
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) R. D. Harger	4747 McLane Parkway	Temple, TX	76504

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Drayton McLane, Jr.	4747 McLane Parkway	Temple, TX	76504
Joseph S. Hardin, Jr.	4747 McLane Parkway	Temple, TX	76504
R. D. Harger	4747 McLane Parkway	Temple, TX	76504

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 1,000,000

CLASS Common

SERIES N/A

PAR VALUE OR
WITHOUT PAR \$0.10

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 10,000

CLASS Common

SERIES N/A

PAR VALUE OR
WITHOUT PAR \$0.10

Date February 22, 1994

By [Signature]

FILED

FEB 28 1994

001547352

R. D. Harger

PRINT OR TYPE NAME OF OFFICER SIGNING

VP/Treasurer

TITLE OF OFFICER SIGNING

Form 3: 194

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

McLane/Mid-Atlantic, Inc.
Rhode Island Annual Report

Other Officers:

NAME	TITLE	ADDRESS
Caroline R. Mann	Asst. Treasurer	4747 McLane Parkway, Temple, TX 76504
Donald R. Graves	Asst. Secretary	4747 McLane Parkway, Temple, TX 76504

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

1980516 JM.
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0070284 Annual Report for the year 1993

FIRST: The name of the corporation is McLANE/MID-ATLANTIC, INC.

SECOND: It is incorporated under the laws of Texas

THIRD: Character of business, briefly stated, is Wholesale Grocery Distribution

FOURTH: If foreign corporation, address of its principal office P.O. Box 6115 Temple, Texas 76503

FIFTH: Business address in Rhode Island NONE

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Drayton McLane, Jr.	Director	4747 McLane Parkway Temple, TX 76504
Joseph S. Hardin, Jr.	Director	4747 McLane Parkway Temple, TX 76504
Webster F. Stickney, Jr.	Director	4747 McLane Parkway Temple, TX 76504
Joseph S. Hardin, Jr.	President	4747 McLane Parkway Temple, TX 76504
Webster F. Stickney, Jr.	Vice President	4747 McLane Parkway Temple, TX 76504
Michael P. Puryear	Secretary	4747 McLane Parkway Temple, TX 76504
Donald R. Graves	Asst. Secretary	4747 McLane Parkway Temple, TX 76504
Webster F. Stickney, Jr.	Treasurer	4747 McLane Parkway Temple, TX 76504
Caroline R. Mann	Asst. Treasurer	4747 McLane Parkway Temple, TX 76504

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000,000	Common	N/A	\$.10

PAID

FEB 16 1993

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
10,000	Common	N/A	\$.10

SEC'y OF STATE

Dated February 05, 19 93

McLane/Mid-Atlantic, Inc.

(Name of Corporation)

By 

Title Donald R. Graves, Asst. Secretary

(Report must be signed by an officer)