

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008
Secretary of State

DOCUMENT# P01646

Entity Name: BAR-S FOODS CO.

Current Principal Place of Business:

3838 N CENTRAL AVE
STE-1900 PO BOX 29049
PHOENIX, AZ 850389049 US

New Principal Place of Business:

3838 N CENTRAL AVE
STE#1900 PO BOX 29049
PHOENIX, AZ 850389049 US

Current Mailing Address:

3838 N CENTRAL AVE
STE-1900 PO BOX 29049
PHOENIX, AZ 850389049 US

New Mailing Address:

FEI Number: 86-0409987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: DC () Delete
Name: DAY, TIMOTHY
Address: P O BOX 697
City-St-Zip: TETON VILLAGE, WY 830250697 US

Title: D () Delete
Name: KINNE, MORRIS Y
Address: PO BOX 700
City-St-Zip: TETON VILLAGE, WY 83025 US

Title: V () Delete
Name: KUYKENDALL, JAMES S
Address: 3838 N CENTRAL AVE STE-1900
City-St-Zip: PHOENIX, AZ 850129049 US

Title: D () Delete
Name: ASHTON, HARRIS J
Address: 191 CLAPBOARD RIDGE ROAD
City-St-Zip: GREENWICH, CT 06830 US

Title: VC () Delete
Name: UHL, ROBERT W
Address: 8534 N. 16TH PLACE
City-St-Zip: PHOENIX, AZ 85020 US

Title: VS () Delete
Name: WEINMAN, THOMAS F
Address: 11802 N. 60TH STREET
City-St-Zip: SCOTTSDALE, AZ 85254 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: KUYKENDALL, JAMES S
Address: 3838 N CENTRAL AVE STE 1900
City-St-Zip: PHOENIX, AZ 850129049 US

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

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

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: JAMES S. KUYKENDALL

V

01/29/2008

Electronic Signature of Signing Officer or Director

_____ Date