


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90374 046 \*\*\*150.00

**DOCUMENT # P10935**  
 1. Entity Name  
**SODEXHO MANAGEMENT, INC.**



Principal Place of Business  
**9801 WASHINGTONIAN BLVD**  
**GAITHERSBURG, MD 20878 US**

Mailing Address  
**PO BOX 352**  
**BUFFALO, NY 14240 US**

**14004789**



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04072004 Chg-P CR2E034 (10/03)

4. FEI Number  
**16-0812661**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**PRENTICE-HALL CORPORATION SYSTEM, INC.**  
**1201 HAYS STREET**  
**SUITE 105**  
**TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD	LANDEL, MICHEL	<input checked="" type="checkbox"/> Delete	TITLE P	Macedonia, Richard	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	9801 WASHINGTONION BLVD		NAME	9801 Washingtonian Blvd.	
STREET ADDRESS	GAITHERSBURG, MD 20878		STREET ADDRESS	Gaithersburg, MD 20878	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE VD	BUSH, JOHN	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9801 WASHINGTONION BLVD		NAME		
STREET ADDRESS	GAITHERSBURG, MD 20878		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE S	ROBINS, SCOTT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9801 WASHINGTONIAN BLVD		NAME		
STREET ADDRESS	GAITHERSBURG, MD 20878		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE VDAS	STERN, ROBERT A	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9801 WASHINGTONION BLVD		NAME		
STREET ADDRESS	GAITHERSBURG, MD 20878		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE AS	ALLEN, RICHARD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10 EARHART DR		NAME		
STREET ADDRESS	WILLIAMSVILLE, NY: 14221		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE ATP	BLASS, MARC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9801 WASHINGTONION BLVD		NAME		
STREET ADDRESS	GAITHERSBURG, MD 20878		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Richard H. Allen **Richard H. Allen** **4/13/04** **846-372-8291**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

14004789  
#P10935

**SODEXHO MANAGEMENT, INC.**

EIN: 16-0812661  
State of Incorporation New York

**Directors:**

Michel Landel  
Robert A. Stern  
John M. Bush

**Officers:**

President: Richard Macedonia

Vice President: Robert A. Stern  
John M. Bush  
Richard Brockland  
Philippe Taillet  
Rodney Bond  
George Chavel  
Tom Mulligan  
Stephen J. Brady  
Rohini Anand  
James. T. Duke  
Ann Oka

Assistant Secretaries: Richard H. Allen (Business Address: 10 Earhart Drive, Williamsville, NY 14221)  
Brenda P. Fuller  
Anastasia E. Sweeney  
David Hayes  
Thomas R. Morse  
Robert A. Stern  
Anthony Viola

Secretary: Scott Robins

Treasurer: Vacant

Assistant-Treasurer: Marc Blass

**Business Address for the Above Named Officers and Directors:**

9801 Washingtonian Blvd.  
Gaithersburg, MD 20878