

1.) CORPORATION NAME:

SUPERVALU HOLDINGS, INC.

DUE DATE: **2/29/2012**

SCC ID NO: **F1172131**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MO

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7075 FLYING CLOUD DR

CITY/ST/ZIP: EDEN PRAIRIE, MN 55344-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: PETER J VAN HELDEN
TITLE: PRESIDENT
ADDRESS: 7075 FLYING CLOUD DR
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER

DIRECTOR

NAME: JOHN F BOYD
TITLE: GRP VP & TREAS
ADDRESS: 250 PARKCENTER BLVD
CITY/ST/ZIP/CO: BOISE, ID 83706-

OFFICER

DIRECTOR

NAME: J ANDREW HERRING
TITLE: EXEC VP
ADDRESS: 7075 FLYING CLOUD DR
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER

DIRECTOR

NAME: DAVID M OLIVER
TITLE: VICE PRESIDENT
ADDRESS: 11840 VALLEY VIEW RD
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER

DIRECTOR

NAME: BOBBY K RAJENDRAN
TITLE: VICE PRESIDENT
ADDRESS: 7400 95TH ST
CITY/ST/ZIP/CO: PLEASANT PRAIRIE, WI 53158-

OFFICER

DIRECTOR

NAME: SHERRY M SMITH TITLE: EXEC VP ADDRESS: 7075 FLYING CLOUD DR CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: DOYLE J TROYER TITLE: VICE PRESIDENT ADDRESS: 250 PARKCENTER BLVD CITY/ST/ZIP/CO: BOISE, ID 83706-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: BARBRA A NUNZIATO TITLE: ASST SECRETARY ADDRESS: 150 PIERCE RD STE 200 CITY/ST/ZIP/CO: ITASCA, IL 60143-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: TODD N SHELDON TITLE: VP & SECRETARY ADDRESS: 11840 VALLEY VIEW RD. CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: FRED W BOEHLER TITLE: SR VP ADDRESS: 19011 LAKE DR E CITY/ST/ZIP/CO: CHANHASSEN, MN 55317-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ DOYLE J TROYER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DOYLE J TROYER, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE
1/10/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	