

1.) CORPORATION NAME:

**ODWALLA, INC.**

DUE DATE: **5/31/2011**

SCC ID NO: **F1336850**

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	15,000,000
PREFER	5,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE COCA-COLA PLAZA, N.W.

CITY/ST/ZIP: ATLANTA, GA 30313-

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: ALISON LEWIS  
TITLE: PRESIDENT  
ADDRESS: ONE COCA-COLA PLAZA, N.W.  
CITY/ST/ZIP/CO: ATLANTA, GA 30313-

OFFICER

DIRECTOR

NAME: SUSAN M. KIRMAYER  
TITLE: VICE PRESIDENT  
ADDRESS: ONE COCA-COLA PLAZA, N.W.  
CITY/ST/ZIP/CO: ATLANTA, GA 30313-

OFFICER

DIRECTOR

NAME: CHRISTOPHER P. NOLAN  
TITLE: VICE PRESIDENT  
ADDRESS: ONE COCA-COLA PLAZA, N.W.  
CITY/ST/ZIP/CO: ATLANTA, GA 30313-

OFFICER

DIRECTOR

NAME: GLORIA K. BOWDEN  
TITLE: SECRETARY  
ADDRESS: ONE COCA-COLA PLAZA, N.W.  
CITY/ST/ZIP/CO: ATLANTA, GA 30313-

OFFICER

DIRECTOR

NAME: CHRIS P. NOLAN  
TITLE: TREASURER  
ADDRESS: ONE COCA-COLA PLAZA, N.W.  
CITY/ST/ZIP/CO: ATLANTA, GA 30313-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THEODORE H. GHIZ JR. ASST TREASURER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM D HAWKINS, III OTHER OFFICER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. ALEXANDER M. DOUGLAS JR. DIRECTOR ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MELODY C. JUSTICE DIRECTOR ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN P. KELLEY DIRECTOR ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHY N. WALLER DIRECTOR ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HELEN B. JACKSON ASST TREASURER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAN L. LOCKRIDGE ASST TREASURER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FIONA K. PAYNE ASST SECRETARY ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BETSY TSE VICE PRESIDENT ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBIN YNES VP/CONTROLLER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES R. STEICHEN CFO/SVP ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEOFFREY J. KELLY OTHER OFFICER ONE COCA-COLA PLAZA, N.W. ATLANTA, GA 30313-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ GLORIA K. BOWDEN	GLORIA K. BOWDEN, SECRETARY	4/16/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.