

1.) CORPORATION NAME:

DUE DATE: **11/30/2012**

New World Pasta Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1690579**

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 85 SHANNON ROAD

CITY/ST/ZIP: HARRISBURG, PA 17112

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:	BASTIAAN G. DE ZEEUW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2777 ALLEN PARKWAY		
CITY/ST/ZIP/CO:	HOUSTON, TX 77019		
NAME:	BRETT L. BECKFIELD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	85 SHANNON ROAD		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	R. SHANE FAUCETT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	85 SHANNON ROAD		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	GERARD J. FERGUSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	85 SHANNON ROAD		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	JOSEPH MARELLI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	85 SHANNON ROAD		
CITY/ST/ZIP/CO:	HARRISBURG, PA 17112		
NAME:	ELIZABETH B. WOODARD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2777 ALLEN PARKWAY		
CITY/ST/ZIP/CO:	HOUSTON, TX 77019		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY S. RICHARDSON SVP/CFO 85 SHANNON ROAD HARRISBURG, PA 17112	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTONIO HERNANDEZ CALLEJAS DIRECTOR PASEO DE LA CASTELLANA 20 MADRID,,28046,SPAIN , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GUY CALLEJON DIRECTOR 4 RUE BOILEAU B P 6452 69413 LYON,,CEDEZ 06,FRANCE , , FN	<input type="checkbox"/> OFFICER	<input checked="" 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/ GREGORY S. RICHARDSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GREGORY S. RICHARDSON, SVP/CFO PRINTED NAME AND CORPORATE TITLE	11/28/2012 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.			