

1.) CORPORATION NAME:

**Shoppers Food Warehouse Corporation**

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

SCC ID NO: **F1789868**

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**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
CAP	50,000
COMANV	25,000
COMB	25,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**OH**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11840 VALLEY VIEW ROAD

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: JOHN P BREEDLOVE  
TITLE: VP/SECRETARY  
ADDRESS: 11840 VALLEY VIEW RD  
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER  DIRECTOR

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

OFFICER  DIRECTOR

NAME: RACHEL V FRIEDENBERG  
TITLE: ASST SECRETARY  
ADDRESS: 11840 VALLEY VIEW RD  
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER  DIRECTOR

NAME: TODD N SHELDON  
TITLE: DIRECTOR  
ADDRESS: 11840 VALLEY VIEW RD  
CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-

OFFICER  DIRECTOR

NAME: CHRISTOPHER T DIMOS  
TITLE: VICE PRESIDENT  
ADDRESS: 3030 CULLERTON DR  
CITY/ST/ZIP/CO: FRANKLIN PARK, IL 60131-

OFFICER  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
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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
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NAME: TIM LOWE TITLE: PRESIDENT ADDRESS: 16901 MELFORD BLVD CITY/ST/ZIP/CO: BOWIE, MD 20715-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: EDWARD A KLIIG TITLE: VICE PRESIDENT ADDRESS: 16901 MELFORD BLVD CITY/ST/ZIP/CO: BOWIE, MD 20715-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DAVID M OLIVER TITLE: VICE PRESIDENT ADDRESS: 11840 VALLEY VIEW RD CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-	<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/ DOYLE J TROYER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DOYLE J TROYER, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/3/2011 DATE
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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.