| No. C 84516  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |                        | Annual Report Form  1. Mailing Address: Correct in this box if needed.  HICKORY FARMS, INC.  KRISTINA R FRIEDMAN  1505 HOLLAND RD |  | Registered Agent and Address (NO PO BOX)  CT CORPORATION SYSTEM     300 NORTH 6TH STREET     BOISE ID 83702     USA  3. New Registered Agent Signature:* |       |         |             |
|---|------------------------|---|--|--|-------|---------|-------------|
|   |                        |   |  |  |       |         |             |
| Office Held   | Name                   |   | Street or PO Address                         | City   | State | Country | Postal Code |
| DIRECTOR  | DAVID FINN             | IGAN  | 2500 TOWN CENTER CIRCLE STE 470              | BOCA RATON   | FL    | USA     | 33486       |
| DIRECTOR  | RECTOR MARK BRODY      |   | 5200 TOWN CENTER CIRCLE STE 470              | <b>BOCA RATON</b>  | FL    | USA     | 33486       |
| DIRECTOR  | IRECTOR MARK RODRIGUEZ |   | 1505 HOLLAND RD                              | MAUMEE   | OH    | USA     | 43537       |
| TREASURER   | ASURER MARC MUCCI      |   | 1505 HOLLAND RD                              | MAUMEE   | OH    | USA     | 43537       |
| SECRETARY   | CRETARY MARC MUCCI     |   | 1505 HOLLAND RD                              | MAUMEE   | OH    | USA     | 43537       |
| PRESIDENT   | MARC RODE              | RIGUEZ  | 1505 HOLLAND RD                              | MAUMEE   | ОН    | USA     | 43537       |
| 5. Organized Under the Laws of: 6. Ani  |                        | 6. Annual Report mus  | . Annual Report must be signed.*             |  |       |         |             |
| DE  |                        | Signature: Marc Mucci   |  | Date: 08/18/2010   |       |         |             |
| C 84516   |                        | Name (type or print): Marc Mucci  |  | Title: Cfo   |       |         |             |
| Processed 08/18/2010  |                        | * Electronically provide  | ed signatures are accepted as original signa | atures.  |       |         |             |