Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ **Complete all entries in accordance with the instructions to the Form 5500.**	**2011** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/01/1996

2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)

FRESH UNLIMITED INC. DBA FRESHWAY FOODS

601 N. STOLLE AVE.
SIDNEY, OH 45365

2b Employer Identification Number (EIN) 31-1230224

2c Sponsor's telephone number 937-498-4664

2d Business code (see instructions) 311400

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2012	TONY ARNOLD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
FRESH UNLIMITED INC. DBA FRESHWAY FOODS

601 N. STOLLE AVE.
SIDNEY, OH 45365

3b Administrator's EIN
31-1230224

3c Administrator's telephone number
937-498-4664

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	341
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	187
b	Retired or separated participants receiving benefits	**6b**	1
c	Other retired or separated participants entitled to future benefits	**6c**	33
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	221
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	221
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	214
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	25
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2F 2G 2J 2K 3D 3H 3B

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- (1) [X] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) [X] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) [X] **R** (Retirement Plan Information)
- (2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) [X] **H** (Financial Information)
- (2) [ ] **I** (Financial Information – Small Plan)
- (3) [X] 1 **A** (Insurance Information)
- (4) [X] **C** (Service Provider Information)
- (5) [X] **D** (DFE/Participating Plan Information)
- (6) [ ] **G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)	Insurance Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.** ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	**2011** **This Form is Open to Public Inspection**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan	**B** Three-digit plan number (PN) ▶	001
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)		

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
FRESH UNLIMITED INC. DBA FRESHWAY FOODS	31-1230224

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

GREAT WEST LIFE AND ANNUITY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year **(f)** From	**(g)** To
84-0467907	68322	932676-01	214	01/01/2011	12/31/2011

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
975	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRUCE DICKMAN

NORTHWESTERN MUTUAL INVESTMENT
232 S OHIO AVE
SIDNEY, OH 45365

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code
975			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	494810
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year		7b	240780
c	Additions: (1) Contributions deposited during the year	7c(1)	52060	
	(2) Dividends and credits	7c(2)	0	
	(3) Interest credited during the year	7c(3)	9177	
	(4) Transferred from separate account	7c(4)	596617	
	(5) Other (specify below)	7c(5)	18773	
	▶ LOAN PAYMENTS			
	(6)Total additions		7c(6)	676627
d	Total of balance and additions (add **b** and **c(6)**).		7d	917407
e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	26729	
	(2) Administration charge made by carrier	7e(2)	75	
	(3) Transferred to separate account	7e(3)	395793	
	(4) Other (specify below)	7e(4)	0	
	▶			
	(5) Total deductions		7e(5)	422597
f	Balance at the end of the current year (subtract **e(5)** from **d**)		7f	494810

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FRESH UNLIMITED INC. DBA FRESHWAY FOODS

D Employer Identification Number (EIN)
31-1230224

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

GREAT-WEST LIFE AND ANNUITY COMPANY

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	RECORDKEEPER	1252	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

(a) Enter name and EIN or address (see instructions)

ADVISED ASSET GROUP

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MGMT	290	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

NORTHWESTERN MUTUAL INVESTMENT

720 E WISCONSIN AVE
MILWAUKEE WI, WI 53202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
55	BROKER/ADVISER	0	Yes [X] No [ ]	Yes [ ] No [X]	5537	Yes [ ] No [X]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NORTHWESTERN MUTUAL INVESTMENT	55	5537

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GREAT-WEST LIFE AND ANNUITY COMPANY 8515 EAST ORCHARD ROAD GREENWOOD VILLAGE, CO 80111	OTHER COMMISSIONS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
FRESH UNLIMITED INC. DBA FRESHWAY FOODS

D Employer Identification Number (EIN)
31-1230224

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: FUTURE FUNDS SERIES ACCT II OF GWL

b Name of sponsor of entity listed in (a): GREAT-WEST LIFE & ANNUITY INS. CO.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
84-0467907-003	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FRESH UNLIMITED INC. DBA FRESHWAY FOODS

D Employer Identification Number (EIN)
31-1230224

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	305683	355644
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	2832217	
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	2811350
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	240780	494810
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	3378680	3661804
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h		
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	3378680	3661804

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	263933	
(B) Participants	2a(1)(B)	390978	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		654911
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	13300	
(F) Other	2b(1)(F)	9177	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		22477
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	130642	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		130642
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-239604
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		568426

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	251162	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		251162
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		32598
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	1542	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1542
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		285302

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		283124
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: COUCHOT HOGENKAMP SEVING AND MOSER **(2)** EIN: 31-1365614

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. **(2)** ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

			Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If "Yes," enter the amount of any plan assets that reverted to the employer this year. ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
FRESH UNLIMITED INC. DBA FRESHWAY FOODS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FRESH UNLIMITED INC. DBA FRESHWAY FOODS

D Employer Identification Number (EIN)
31-1230224

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 20-3691708 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

Fresh Unlimited, Inc.
dba Freshway Foods
401(k) Plan

FINANCIAL STATEMENTS

Years Ended December 31, 2011 and 2010

CONTENTS

	PAGE
INDEPENDENT AUDITORS' REPORT	3
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS	4
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS	5
NOTES TO FINANCIAL STATEMENTS	6-13
SUPPLEMENTARY INFORMATION	
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR	15-16

Couchot, Hogenkamp, Seving & Mosier, Inc.

Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

Board of Directors
Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan
Sidney, Ohio

We were engaged to audit the financial statements and supplemental schedules of Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan as of December 31, 2011 and 2010, and for the years then ended, as listed in the accompanying index. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to such information summarized in Note 10, which was certified by The Great-West Life & Annuity Insurance Company Division – 401(k), the record keeper of the Plan, except for comparing information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the record keeper holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the record keeper as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the record keeper is complete and accurate.

As described in Note 2, these financial statements and supplemental schedules were prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than U.S. generally accepted accounting principles.

Because of the significance of the information on the Plan's 2011 and 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 and 2010 financial statements and supplemental schedules taken as a whole. The form and content of the information included in the 2011 and 2010 financial statements and schedules, other than that derived from the information certified by the record keeper, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Couchot, Hogenkamp, Seving + Mosier, Inc.

October 10, 2012

818 East Franklin Street • Centerville, Ohio 45459
Phone (937) 436-1400 • Fax (937) 436-0349
www.couchot-cpa.com

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

December 31, 2011 and 2010

ASSETS

	2011	2010
Investments		
Mutual funds	$ 2,811,350	$ -
Pooled separate accounts	-	2,832,217
Insurance company general account	494,810	240,780
Participant loans	355,644	305,683
TOTAL ASSETS	3,661,804	3,378,680

LIABILITIES

TOTAL LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,661,804	$ 3,378,680

See accompanying notes.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
Years Ended December 31, 2011 and 2010

ADDITIONS	2011	2010
Additions to net assets attributed to:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	$ (239,604)	$ 302,166
Interest and dividends	153,119	17,247
	(86,485)	319,413
Contributions:		
Participants'	390,978	344,694
Employer's	263,933	221,556
Other (including rollovers)	-	5,545
	654,911	571,795
TOTAL ADDITIONS	568,426	891,208
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	283,760	198,939
Administration expenses	1,542	1,285
TOTAL DEDUCTIONS	285,302	200,224
NET INCREASE	283,124	690,984
NET ASSETS AVAILABLE FOR BENEFITS		
BEGINNING OF YEAR	3,378,680	2,687,696
END OF YEAR	$ 3,661,804	$ 3,378,680

See accompanying notes.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – DESCRIPTION OF PLAN

The following description of the Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan ("Plan") is provided for general information purposes. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

The Plan is a defined contribution plan covering all full-time employees of the Company who have one (1) year of service and are age eighteen (18) or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting. The accompanying financial statements have been prepared using the modified cash basis of accounting. The major difference between the modified cash basis of accounting and generally accepted accounting principles (GAAP) is the recordation of transactions when cash is actually received or disbursed, whereas GAAP establishes receivables and accruals for transactions where cash has not been received or disbursed.

Contributions. Each year, participants may contribute up to the maximum percentage of compensation and dollar amount permissible under Section 402(g) of the Internal Revenue Code not to exceed the limits of Code Sections 401(k), 404 and 415. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan is funded by a group fixed and variable deferred annuity contract. When amounts are invested, participants invest in various enrollment options in The Great-West Life & Annuity Insurance Company Future Funds II separate account. The Plan currently offers twenty-seven (27) investment options for participants. The Plan is designed to be a Safe Harbor 401(k) Plan. The Company contributes 100% of Section 401(k) Deferrals up to the first 3% of Included Compensation, plus 50% of Section 401(k) Deferrals up to the next 2% of Included Compensation. The matching Company contribution is invested consistent with the investment options selected by the Plan participants. Additional profit sharing amounts may be contributed at the option of the Company's board of directors. Contributions are subject to certain limitations. There were no additional profit sharing contributions in 2011 or 2010.

Participant Accounts. Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 2 – SUMMARY OF SIGINIFICANT ACCOUNTING POLICIES (continued)

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. In addition, participants are immediately vested in the Company's safe harbor contributions plus earnings thereon. Vesting in the Company's contributions prior to the safe harbor election plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after six (6) years of credited service.

Participant Loans. Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 10.00%, which are commensurate with local prevailing rates as determined quarterly by the Plan administrator. Principal and interest are paid ratably from compensation each pay period through payroll deductions.

Hardship Withdrawals. Participants may request to receive a hardship withdrawal from their fund accounts. Hardship withdrawals may be authorized for the purchase of personal residence, tuition expense, medical, or to avoid foreclosure on a principal residence. Subsequent to receipt of payment, the participant's right to make voluntary contributions and elective deferrals will be suspended for twelve months.

Payments of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over the life of the participant or joint lives of the participant and spouse. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts. At December 31, 2011 and 2010, forfeited nonvested accounts totaled $507 and $497 respectively. These accounts will be used to reduce future Plan administrative expenses and/or future employer match contributions. Total forfeiture balance used in 2011 and 2010 was $-0- and $85, respectively.

Estimates. The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may different from those estimates.

Administrative Expenses. The Plan sponsor pays for a portion of the administrative expenses of the Plan including preparation and compliance of various reporting and audit requirements.

Subsequent Events. Subsequent events were evaluated through October 10, 2012, which is the date the financial statements were available to be issued.

NOTE 3 – INVESTMENT CONTRACT WITH INSURANCE COMPANY

In 1996, the Plan entered into a Qualified Group Annuity Contract with The Great-West Life & Annuity Insurance Company (Great-West). Great-West maintains the contributions in unallocated pooled separate accounts. The accounts are credited with both employee and employer contributions, earnings on the underlying investments, and are charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at contract value (fair value) as reported to the Plan by Great-West. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Effective October, 2011, the Plan transitioned from a Qualified Group Annuity Contract to a NAV Custodial Account with Orchard Trust Company a member of Great-West.

NOTE 4 – INVESTMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

FAIR VALUE MEASUREMENTS AT REPORTING DATE USING:

December 31, 2011	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Alger SmallCap & MidCap Growth A	89,533	$ 89,533	$ -	$ -
American Century Equity Income Adv	61,623	61,623	-	-
American Funds Capital World G/I R3	73,351	73,351	-	-
American Funds Growth Fund	137,169	137,169	-	-
Artisan International Value	9,333	9,333	-	-
Baron Small Cap Fund Retail	7,721	7,721		
Columbia Small Cap Value I Fund R3	14,436	14,436	-	-
Davis NY Venture A	23,351	23,351		
Diamond Hill Large Cap A	44,580	44,580		
Fidelity Advisor Leveraged Co Stk - T	104,510	104,510		
Fidelity Advisor Small Cap T	36,314	36,314	-	-
Guaranteed Portfolio Fund	494,810	494,810	-	-
Janus Forty Class S	1,665	1,665	-	-
Janus Overseas Funds S	334	334	-	-
Lazard Emerging Markets Open	12,864	12,864	-	-
Maxim Aggressive Profile II	564,719	564,719	-	-
Maxim Bond Index	53,554	53,554	-	-
Maxim Conservative Profile II	87,107	87,107	-	-
Maxim Index 600	40,556	40,556	-	-
Maxim Loomis Sayles Small-Cap Value	1,360	1,360	-	-
Maxim Moderate Profile II	920,086	920,086	-	-
Maxim Moderately Aggressive Profile II	69,966	69,966	-	-
Maxim Moderately Conservative Profile II	46,555	46,555	-	-
Maxim S&P 500 Index	44,209	44,209	-	-
Maxim T. Rowe Price Mid-Cap Growth	14,255	14,255	-	-
Maxim US Government Securities Fund	67,264	67,264	-	-
MFS Value Fund A	34,605	34,605	-	-
Munder Mid-Cap Core Growth A	1,884	1,884	-	-
Oppenheimer International Bond Fund A	229	229	-	-
Perkins Mid Cap Value S	89,229	89,229	-	-
Pimco Total Return Admin	87,682	87,682	-	-
Thornburg International Value Fund R3	71,306	71,306	-	-
	$ 3,306,160	$ 3,306,160	$ -	$ -

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

FAIR VALUE MEASUREMENTS AT REPORTING DATE USING:

December 31, 2010	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Alger SmallCap & MidCap Growth A	$ 79,954	$ 79,954	$ -	$ -
American Century Equity Income Adv	23,787	23,787	-	-
American Funds Capital World G/I R3	110,745	110,745	-	-
American Funds Growth Fund	173,737	173,737	-	-
Artisan International Value	3,670	3,670	-	-
Columbia Small Cap Value I Fund R3	14,018	14,018	-	-
Davis NY Venture A	36,499	36,499	-	-
Diamond Hill Large Cap A	39,312	39,312	-	-
Fidelity Advisor Leveraged Co Stk - T	103,513	103,513	-	-
Fidelity Advisor Small Cap T	47,655	47,655	-	-
Guaranteed Portfolio Fund	240,780	240,780	-	-
Janus Forty Class S	16,304	16,304	-	-
Janus Overseas Funds S	191	191	-	-
Lazard Emerging Markets Open	9,730	9,730	-	-
Maxim Aggressive Profile II	615,339	615,339	-	-
Maxim Bond Index	46,353	46,353	-	-
Maxim Conservative Profile II	70,811	70,811	-	-
Maxim Index 600	40,853	40,853	-	-
Maxim Moderate Profile II	910,143	910,143	-	-
Maxim Moderately Aggressive Profile II	55,646	55,646	-	-
Maxim Moderately Conservative Profile II	17,643	17,643	-	-
Maxim S&P 500 Index	47,785	47,785	-	-
Maxim T. Rowe Price Mid-Cap Growth	7,270	7,270	-	-
Maxim US Government Mortgage Securities	55,069	55,069	-	-
MFS Value Fund A	31,296	31,296	-	-
Perkins Mid Cap Value S	87,361	87,361	-	-
Pimco Total Return Admin	89,177	89,177	-	-
Thornburg International Value Fund R3	98,356	98,356	-	-
	$ 3,072,997	$ 3,072,997	$ -	$ -

NOTE 4 – INVESTMENTS

The fair value measurement authoritative literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

Level 1 Fair Value Measurements

The fair values of common stock, most corporate bonds, and U.S. Government securities are based on quoted market prices.

The Plan did not have any investments valued using either the Level 2 or Level 3 inputs as of December 31, 2011 or 2010.

The following presents investments at December 31, 2011 and 2010 that represent 5% or more of the Plan's net assets.

	2011	2010
Qualified Group Annuity Contract with The Great-West Life & Annuity Insurance Company	$ -	$ 3,378,680
Guaranteed Portfolio Fund	494,810	-
Maxim Aggressive Profile II	564,719	-
Maxim Moderate Profile II	920,086	-
Participant Loans	355,644	-
Total	$ 2,335,259	$ 3,378,680

NOTE 5 – PLAN AMENDMENTS

The Plan has been restated for the Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA) to maintain the Plan's qualified status effective in 2011.

The Plan has also been amended to be in compliance with the Pension Protection Act of 2006 (PPA) and for the Heroes Earnings Assistance and Relief Tax Act of 2008 (HEART) also effective in 2011.

NOTE 6 – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

NOTE 7 – RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to Schedule H of Form 5500;

	2011	2010
Net assets available for benefits per the financial statements	$ 3,661,804	$ 3,378,680
Net assets available for benefits per Schedule H to the Form 5500	$ 3,661,804	$ 3,378,680
Variance	-	-

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2011 and 2010 to Schedule H of Form 5500;

	2011	2010
Benefits paid to participants per the financial statements	$ 283,760	$ 198,939
Benefits paid to participants per Schedule H of Form 5500	$ 251,162	$ 172,339
Certain deemed distributions of participant loans	32,598	26,600
Total Distributions	$ 283,760	$ 198,939

NOTE 8 – TAX STATUS

The Internal Revenue Service has determined that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 9 – EXCESS CONTRIBUTIONS

Contributions not allowed by the Plan from participants are returned to participants by March 15 of the year following, as required to satisfy the relevant nondiscrimination provisions of the Plan.

NOTE 10 – LIMITED SCOPE AUDIT

As noted in the Independent Auditor's Report, we did not audit information certified to be accurate and complete by Great-West. The following is a list of assets held and managed by Great-West as of December 31, 2011 and 2010.

	2011	2010
Assets at fair value:		
Great West Life & Annuity Insurance Company	$ 3,661,804	$ 3,378,680

The following is a summary of revenue and expense activity for the year ended December 31, 2011 and 2010.

	2011	2010
Interest and dividends	$ 153,119	$ 17,247
Net appreciation (depreciation) in plan assets	(239,604)	302,166
Less: Distributions	(283,760)	(198,939)
Less: Administrative expenses	(1,542)	(1,285)
	(285,302)	(200,224)
	$ (371,787)	$ 119,189

SUPPLEMENTARY INFORMATION

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

As of December 31, 2011

(a)	(b)	(c)		(d)	(e)
	Investment Option	Maturity Date	Interest Rate	Cost	2011
	Participant Loans	Various	4.25% to 10.00%	$ 355,091	$ 355,644
	Alger SmallCap & MidCap Growth A			75,839	89,533
	American Century Equity Income Adv			55,322	61,623
	American Funds Capital World G/I R3			67,710	73,351
	American Funds Growth Fund			123,823	137,169
	Artisan International Value			9,021	9,333
	Baron Small Cap Fund Retail			6,791	7,721
	Columbia Small Cap Value I Fund R3			12,938	14,436
	Davis NY Venture A			20,663	23,351
	Diamond Hill Large Cap A			38,711	44,580
	Fidelity Advisor Leveraged Co Stk - T			92,749	104,510
	Fidelity Advisor Small Cap T			34,031	36,314
	Guaranteed Portfolio Fund			475,911	494,810
	Janus Forty Class S			1,527	1,665
	Janus Overseas Funds S			356	334
	Lazard Emerging Markets Open			12,795	12,864
	Maxim Aggressive Profile II			511,487	564,719
	Maxim Bond Index			53,767	53,554
	Maxim Conservative Profile II			89,771	87,107
	Maxim Index 600			34,764	40,556
	Maxim Loomis Sayles Small-Cap Value			1,210	1,360
	Maxim Moderate Profile II			934,791	920,086
	Maxim Moderately Aggressive Profile II			77,715	69,966
	Maxim Moderately Conservative Profile II			49,015	46,555
	Maxim S&P 500 Index			39,477	44,209
	Maxim T. Rowe Price Mid-Cap Growth			14,148	14,255
	Maxim US Government Securities Fund			67,733	67,264
	MFS Value Fund A			30,444	34,605
	Munder Mid-Cap Core Growth A			1,824	1,884
	Oppenheimer International Bond Fund A			232	229
	Perkins Mid Cap Value S			85,861	89,229
	Pimco Total Return Admin			87,127	87,682
	Thornburg International Value Fund R3			67,207	71,306
	TOTAL			$ 3,529,851	$ 3,661,804

Note: Column (a) is blank as there were no parties-in-interest.
Column (d) is blank as all investments are participant directed.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

As of December 31, 2010

(a)	(b)	(c)		(d)	(e)
	Investment Option	**Maturity Date**	**Interest Rate**	**Cost**	**2010**
	Participant Loans	Various	4.25% to 10.00%	$ 305,723	$ 305,683
	Alger SmallCap & MidCap Growth A			65,032	79,954
	American Century Equity Income Adv			20,967	23,787
	American Funds Capital World G/I R3			98,517	110,745
	American Funds Growth Fund			149,825	173,737
	Artisan International Value			3,226	3,670
	Columbia Small Cap Value I Fund R3			12,226	14,018
	Davis NY Venture A			32,505	36,499
	Diamond Hill Large Cap A			34,395	39,312
	Fidelity Advisor Leveraged Co Stk - T			83,247	103,513
	Fidelity Advisor Small Cap T			39,712	47,655
	Guaranteed Portfolio Fund			230,067	240,780
	Janus Forty Class S			14,271	16,304
	Janus Overseas Funds S			161	191
	Lazard Emerging Markets Open			9,451	9,730
	Maxim Aggressive Profile II			522,924	615,339
	Maxim Bond Index			46,207	46,353
	Maxim Conservative Profile II			66,849	70,811
	Maxim Index 600			33,016	40,853
	Maxim Moderate Profile II			818,812	910,143
	Maxim Moderately Aggressive Profile II			49,335	55,646
	Maxim Moderately Conservative Profile II			16,769	17,643
	Maxim S&P 500 Index			40,930	47,785
	Maxim T. Rowe Price Mid-Cap Growth			6,345	7,270
	Maxim US Government Mortgage Securities			55,090	55,069
	MFS Value Fund A			27,323	31,296
	Perkins Mid Cap Value S			75,877	87,361
	Pimco Total Return Admin			87,388	89,177
	Thornburg International Value Fund R3			83,085	98,356
	TOTAL			$ 3,029,275	$ 3,378,680

Note: Column (a) is blank as there were no parties-in-interest.
Column (d) is blank as all investments are participant directed.

ASSETS HELD FOR INVESTMENT PURPOSES

Fresh Unlimited Inc dba Freshway Foods
01-JAN-11 to 31-DEC-11

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
1PBAXCP			89,771.02	87,107.31
1PBAXMC			49,015.28	46,555.18
1PBAXMP			934,790.50	920,085.72
1PBAXMA			77,714.85	69,966.17
1PBAXAP			511,486.58	564,719.03
197AFCW			67,710.11	73,351.28
1ARTKX			9,021.50	9,333.12
1JIGRX1			355.82	334.57
1LZOEX			12,794.61	12,864.28
1TGVRX			67,207.00	71,306.04
1ALMAX			75,838.62	89,532.61
1BSCFX			6,790.57	7,721.02
1CSMIX			12,938.08	14,436.07
1FSCTX			34,030.95	36,314.01
1MXIN6			34,763.90	40,555.78
1SVAXLS			1,209.96	1,359.94
1FLSTX			92,749.33	104,510.46
1MGRXTM			14,147.88	14,254.72
1MGOAX			1,823.96	1,884.30
1JMVIX1			85,861.16	89,228.76
1TWEAX			55,321.62	61,623.32
195AFGF			123,822.84	137,168.90
1NYVTX			20,662.69	23,350.60
1DHLAX			38,710.98	44,579.76
1JARTX			1,526.91	1,664.69
194MX5			39,477.33	44,209.14
1MEIAX			30,444.49	34,605.22
1BIMXBI			53,767.00	53,553.99
1BIMXUS			67,733.25	67,263.93
1OIBAX			232.21	228.57
1PTRAX			87,126.81	87,681.93
1PORT		1.800	475,570.62	494,303.11
			3,174,418.43	**3,305,653.53**
PARTICIPANT LOANS	VARIOUS	4.250-9.250	355,091.19	355,644.41
FORFEITURES			340.41	506.77

ASSETS HELD FOR INVESTMENT PURPOSES

Fresh Unlimited Inc dba Freshway Foods
01-JAN-11 to 31-DEC-11

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE

LEGEND

INVESTMENT OPTION:

1PBAXCP	Maxim Con Profile II Portfolio Initial	1PBAXMC	Maxim Mod Con Profile II Port Initial
1PBAXMP	Maxim Moderate Profile II Port Initial	1PBAXMA	Maxim Mod Agg Profile II Port Initial
1PBAXAP	Maxim Aggressive Profile II Port Initial	197AFCW	American Funds Capital World G/I R3
1ARTKX	Artisan International Value Investor	1JIGRX1	Janus Overseas Fund S
1LZOEX	Lazard Emerging Markets Open	1TGVRX	Thornburg International Value Fund R3
1ALMAX	Alger SMidCap Growth A	1BSCFX	Baron Small Cap Fund Retail
1CSMIX	Columbia Small Cap Value I Fund A	1FSCTX	Fidelity Advisor Small Cap T
1MXIN6	Maxim Index 600	1SVAXLS	Maxim Loomis Sayles Small-Cap Value
1FLSTX	Fidelity Advisor Leveraged Co Stk - T	1MGRXTM	Maxim T. Rowe Price Mid-Cap Growth
1MGOAX	Munder Mid-Cap Core Growth A	1JMVIX1	Perkins Mid Cap Value S
1TWEAX	American Century Equity Income - A	195AFGF	American Funds Growth Fund of Amer R3
1NYVTX	Davis NY Venture A	1DHLAX	Diamond Hill Large Cap A
1JARTX	Janus Forty S	194MX5	Maxim S & P 500 Index
1MEIAX	MFS Value Fund A	1BIMXBI	Maxim Bond Index
1BIMXUS	Maxim US Government Securities Fund	1OIBAX	Oppenheimer International Bond Fund A
1PTRAX	PIMCO Total Return Admin	1PORT	Guaranteed Portfolio Fund

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year
CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year

Fresh Unlimited, Inc.
dba Freshway Foods
401(k) Plan

FINANCIAL STATEMENTS

Years Ended December 31, 2011 and 2010

CONTENTS

	PAGE
INDEPENDENT AUDITORS' REPORT	3
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS	4
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS	5
NOTES TO FINANCIAL STATEMENTS	6-13
SUPPLEMENTARY INFORMATION	
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR	15-16

Couchot, Hogenkamp, Seving & Mosier, Inc.

Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

Board of Directors
Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan
Sidney, Ohio

We were engaged to audit the financial statements and supplemental schedules of Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan as of December 31, 2011 and 2010, and for the years then ended, as listed in the accompanying index. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to such information summarized in Note 10, which was certified by The Great-West Life & Annuity Insurance Company Division – 401(k), the record keeper of the Plan, except for comparing information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the record keeper holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the record keeper as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the record keeper is complete and accurate.

As described in Note 2, these financial statements and supplemental schedules were prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than U.S. generally accepted accounting principles.

Because of the significance of the information on the Plan's 2011 and 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 and 2010 financial statements and supplemental schedules taken as a whole. The form and content of the information included in the 2011 and 2010 financial statements and schedules, other than that derived from the information certified by the record keeper, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Couchot, Hogenkamp, Seving + Mosier, Inc.

October 10, 2012

818 East Franklin Street • Centerville, Ohio 45459
Phone (937) 436-1400 • Fax (937) 436-0349
www.couchot-cpa.com

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

December 31, 2011 and 2010

ASSETS

	2011	2010
Investments		
Mutual funds	$ 2,811,350	$ -
Pooled separate accounts	-	2,832,217
Insurance company general account	494,810	240,780
Participant loans	355,644	305,683
TOTAL ASSETS	3,661,804	3,378,680

LIABILITIES

TOTAL LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,661,804	$ 3,378,680

See accompanying notes.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
Years Ended December 31, 2011 and 2010

ADDITIONS	2011	2010
Additions to net assets attributed to:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	$ (239,604)	$ 302,166
Interest and dividends	153,119	17,247
	(86,485)	319,413
Contributions:		
Participants'	390,978	344,694
Employer's	263,933	221,556
Other (including rollovers)	-	5,545
	654,911	571,795
TOTAL ADDITIONS	568,426	891,208
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	283,760	198,939
Administration expenses	1,542	1,285
TOTAL DEDUCTIONS	285,302	200,224
NET INCREASE	283,124	690,984
NET ASSETS AVAILABLE FOR BENEFITS		
BEGINNING OF YEAR	3,378,680	2,687,696
END OF YEAR	$ 3,661,804	$ 3,378,680

See accompanying notes.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – DESCRIPTION OF PLAN

The following description of the Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan ("Plan") is provided for general information purposes. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

The Plan is a defined contribution plan covering all full-time employees of the Company who have one (1) year of service and are age eighteen (18) or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting. The accompanying financial statements have been prepared using the modified cash basis of accounting. The major difference between the modified cash basis of accounting and generally accepted accounting principles (GAAP) is the recordation of transactions when cash is actually received or disbursed, whereas GAAP establishes receivables and accruals for transactions where cash has not been received or disbursed.

Contributions. Each year, participants may contribute up to the maximum percentage of compensation and dollar amount permissible under Section 402(g) of the Internal Revenue Code not to exceed the limits of Code Sections 401(k), 404 and 415. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan is funded by a group fixed and variable deferred annuity contract. When amounts are invested, participants invest in various enrollment options in The Great-West Life & Annuity Insurance Company Future Funds II separate account. The Plan currently offers twenty-seven (27) investment options for participants. The Plan is designed to be a Safe Harbor 401(k) Plan. The Company contributes 100% of Section 401(k) Deferrals up to the first 3% of Included Compensation, plus 50% of Section 401(k) Deferrals up to the next 2% of Included Compensation. The matching Company contribution is invested consistent with the investment options selected by the Plan participants. Additional profit sharing amounts may be contributed at the option of the Company's board of directors. Contributions are subject to certain limitations. There were no additional profit sharing contributions in 2011 or 2010.

Participant Accounts. Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 2 – SUMMARY OF SIGINIFICANT ACCOUNTING POLICIES (continued)

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. In addition, participants are immediately vested in the Company's safe harbor contributions plus earnings thereon. Vesting in the Company's contributions prior to the safe harbor election plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after six (6) years of credited service.

Participant Loans. Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 10.00%, which are commensurate with local prevailing rates as determined quarterly by the Plan administrator. Principal and interest are paid ratably from compensation each pay period through payroll deductions.

Hardship Withdrawals. Participants may request to receive a hardship withdrawal from their fund accounts. Hardship withdrawals may be authorized for the purchase of personal residence, tuition expense, medical, or to avoid foreclosure on a principal residence. Subsequent to receipt of payment, the participant's right to make voluntary contributions and elective deferrals will be suspended for twelve months.

Payments of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over the life of the participant or joint lives of the participant and spouse. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts. At December 31, 2011 and 2010, forfeited nonvested accounts totaled $507 and $497 respectively. These accounts will be used to reduce future Plan administrative expenses and/or future employer match contributions. Total forfeiture balance used in 2011 and 2010 was $-0- and $85, respectively.

Estimates. The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may different from those estimates.

Administrative Expenses. The Plan sponsor pays for a portion of the administrative expenses of the Plan including preparation and compliance of various reporting and audit requirements.

Subsequent Events. Subsequent events were evaluated through October 10, 2012, which is the date the financial statements were available to be issued.

NOTE 3 – INVESTMENT CONTRACT WITH INSURANCE COMPANY

In 1996, the Plan entered into a Qualified Group Annuity Contract with The Great-West Life & Annuity Insurance Company (Great-West). Great-West maintains the contributions in unallocated pooled separate accounts. The accounts are credited with both employee and employer contributions, earnings on the underlying investments, and are charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at contract value (fair value) as reported to the Plan by Great-West. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Effective October, 2011, the Plan transitioned from a Qualified Group Annuity Contract to a NAV Custodial Account with Orchard Trust Company a member of Great-West.

NOTE 4 – INVESTMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

FAIR VALUE MEASUREMENTS AT REPORTING DATE USING:

December 31, 2011	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Alger SmallCap & MidCap Growth A	89,533	$ 89,533	$ -	$ -
American Century Equity Income Adv	61,623	61,623	-	-
American Funds Capital World G/I R3	73,351	73,351	-	-
American Funds Growth Fund	137,169	137,169	-	-
Artisan International Value	9,333	9,333	-	-
Baron Small Cap Fund Retail	7,721	7,721		
Columbia Small Cap Value I Fund R3	14,436	14,436	-	-
Davis NY Venture A	23,351	23,351		
Diamond Hill Large Cap A	44,580	44,580		
Fidelity Advisor Leveraged Co Stk - T	104,510	104,510		
Fidelity Advisor Small Cap T	36,314	36,314	-	-
Guaranteed Portfolio Fund	494,810	494,810	-	-
Janus Forty Class S	1,665	1,665	-	-
Janus Overseas Funds S	334	334	-	-
Lazard Emerging Markets Open	12,864	12,864	-	-
Maxim Aggressive Profile II	564,719	564,719	-	-
Maxim Bond Index	53,554	53,554	-	-
Maxim Conservative Profile II	87,107	87,107	-	-
Maxim Index 600	40,556	40,556	-	-
Maxim Loomis Sayles Small-Cap Value	1,360	1,360	-	-
Maxim Moderate Profile II	920,086	920,086	-	-
Maxim Moderately Aggressive Profile II	69,966	69,966	-	-
Maxim Moderately Conservative Profile II	46,555	46,555	-	-
Maxim S&P 500 Index	44,209	44,209	-	-
Maxim T. Rowe Price Mid-Cap Growth	14,255	14,255	-	-
Maxim US Government Securities Fund	67,264	67,264	-	-
MFS Value Fund A	34,605	34,605	-	-
Munder Mid-Cap Core Growth A	1,884	1,884	-	-
Oppenheimer International Bond Fund A	229	229	-	-
Perkins Mid Cap Value S	89,229	89,229	-	-
Pimco Total Return Admin	87,682	87,682	-	-
Thornburg International Value Fund R3	71,306	71,306	-	-
	$ 3,306,160	$ 3,306,160	$ -	$ -

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

FAIR VALUE MEASUREMENTS AT REPORTING DATE USING:

December 31, 2010	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Alger SmallCap & MidCap Growth A	$ 79,954	$ 79,954	$ -	$ -
American Century Equity Income Adv	23,787	23,787	-	-
American Funds Capital World G/I R3	110,745	110,745	-	-
American Funds Growth Fund	173,737	173,737	-	-
Artisan International Value	3,670	3,670	-	-
Columbia Small Cap Value I Fund R3	14,018	14,018	-	-
Davis NY Venture A	36,499	36,499	-	-
Diamond Hill Large Cap A	39,312	39,312	-	-
Fidelity Advisor Leveraged Co Stk - T	103,513	103,513	-	-
Fidelity Advisor Small Cap T	47,655	47,655	-	-
Guaranteed Portfolio Fund	240,780	240,780	-	-
Janus Forty Class S	16,304	16,304	-	-
Janus Overseas Funds S	191	191	-	-
Lazard Emerging Markets Open	9,730	9,730	-	-
Maxim Aggressive Profile II	615,339	615,339	-	-
Maxim Bond Index	46,353	46,353	-	-
Maxim Conservative Profile II	70,811	70,811	-	-
Maxim Index 600	40,853	40,853	-	-
Maxim Moderate Profile II	910,143	910,143	-	-
Maxim Moderately Aggressive Profile II	55,646	55,646	-	-
Maxim Moderately Conservative Profile II	17,643	17,643	-	-
Maxim S&P 500 Index	47,785	47,785	-	-
Maxim T. Rowe Price Mid-Cap Growth	7,270	7,270	-	-
Maxim US Government Mortgage Securities	55,069	55,069	-	-
MFS Value Fund A	31,296	31,296	-	-
Perkins Mid Cap Value S	87,361	87,361	-	-
Pimco Total Return Admin	89,177	89,177	-	-
Thornburg International Value Fund R3	98,356	98,356	-	-
	$ 3,072,997	$ 3,072,997	$ -	$ -

NOTE 4 – INVESTMENTS

The fair value measurement authoritative literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

Level 1 Fair Value Measurements

The fair values of common stock, most corporate bonds, and U.S. Government securities are based on quoted market prices.

The Plan did not have any investments valued using either the Level 2 or Level 3 inputs as of December 31, 2011 or 2010.

The following presents investments at December 31, 2011 and 2010 that represent 5% or more of the Plan's net assets.

	2011	2010
Qualified Group Annuity Contract with The Great-West Life & Annuity Insurance Company	$ -	$ 3,378,680
Guaranteed Portfolio Fund	494,810	-
Maxim Aggressive Profile II	564,719	-
Maxim Moderate Profile II	920,086	-
Participant Loans	355,644	-
Total	$ 2,335,259	$ 3,378,680

NOTE 5 – PLAN AMENDMENTS

The Plan has been restated for the Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA) to maintain the Plan's qualified status effective in 2011.

The Plan has also been amended to be in compliance with the Pension Protection Act of 2006 (PPA) and for the Heroes Earnings Assistance and Relief Tax Act of 2008 (HEART) also effective in 2011.

NOTE 6 – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

NOTE 7 – RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to Schedule H of Form 5500;

	2011	2010
Net assets available for benefits per the financial statements	$ 3,661,804	$ 3,378,680
Net assets available for benefits per Schedule H to the Form 5500	$ 3,661,804	$ 3,378,680
Variance	-	-

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2011 and 2010 to Schedule H of Form 5500;

	2011	2010
Benefits paid to participants per the financial statements	$ 283,760	$ 198,939
Benefits paid to participants per Schedule H of Form 5500	$ 251,162	$ 172,339
Certain deemed distributions of participant loans	32,598	26,600
Total Distributions	$ 283,760	$ 198,939

NOTE 8 – TAX STATUS

The Internal Revenue Service has determined that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 9 – EXCESS CONTRIBUTIONS

Contributions not allowed by the Plan from participants are returned to participants by March 15 of the year following, as required to satisfy the relevant nondiscrimination provisions of the Plan.

NOTE 10 – LIMITED SCOPE AUDIT

As noted in the Independent Auditor's Report, we did not audit information certified to be accurate and complete by Great-West. The following is a list of assets held and managed by Great-West as of December 31, 2011 and 2010.

	2011	2010
Assets at fair value:		
Great West Life & Annuity Insurance Company	$ 3,661,804	$ 3,378,680

The following is a summary of revenue and expense activity for the year ended December 31, 2011 and 2010.

	2011	2010
Interest and dividends	$ 153,119	$ 17,247
Net appreciation (depreciation) in plan assets	(239,604)	302,166
Less: Distributions	(283,760)	(198,939)
Less: Administrative expenses	(1,542)	(1,285)
	(285,302)	(200,224)
	$ (371,787)	$ 119,189

SUPPLEMENTARY INFORMATION

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

As of December 31, 2011

(a)	(b)	(c)		(d)	(e)
	Investment Option	Maturity Date	Interest Rate	Cost	2011
	Participant Loans	Various	4.25% to 10.00%	$ 355,091	$ 355,644
	Alger SmallCap & MidCap Growth A			75,839	89,533
	American Century Equity Income Adv			55,322	61,623
	American Funds Capital World G/I R3			67,710	73,351
	American Funds Growth Fund			123,823	137,169
	Artisan International Value			9,021	9,333
	Baron Small Cap Fund Retail			6,791	7,721
	Columbia Small Cap Value I Fund R3			12,938	14,436
	Davis NY Venture A			20,663	23,351
	Diamond Hill Large Cap A			38,711	44,580
	Fidelity Advisor Leveraged Co Stk - T			92,749	104,510
	Fidelity Advisor Small Cap T			34,031	36,314
	Guaranteed Portfolio Fund			475,911	494,810
	Janus Forty Class S			1,527	1,665
	Janus Overseas Funds S			356	334
	Lazard Emerging Markets Open			12,795	12,864
	Maxim Aggressive Profile II			511,487	564,719
	Maxim Bond Index			53,767	53,554
	Maxim Conservative Profile II			89,771	87,107
	Maxim Index 600			34,764	40,556
	Maxim Loomis Sayles Small-Cap Value			1,210	1,360
	Maxim Moderate Profile II			934,791	920,086
	Maxim Moderately Aggressive Profile II			77,715	69,966
	Maxim Moderately Conservative Profile II			49,015	46,555
	Maxim S&P 500 Index			39,477	44,209
	Maxim T. Rowe Price Mid-Cap Growth			14,148	14,255
	Maxim US Government Securities Fund			67,733	67,264
	MFS Value Fund A			30,444	34,605
	Munder Mid-Cap Core Growth A			1,824	1,884
	Oppenheimer International Bond Fund A			232	229
	Perkins Mid Cap Value S			85,861	89,229
	Pimco Total Return Admin			87,127	87,682
	Thornburg International Value Fund R3			67,207	71,306
	TOTAL			$ 3,529,851	$ 3,661,804

Note: Column (a) is blank as there were no parties-in-interest.
Column (d) is blank as all investments are participant directed.

Fresh Unlimited, Inc. dba Freshway Foods 401(k) Plan

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

As of December 31, 2010

(a)	(b)	(c)		(d)	(e)
	Investment Option	**Maturity Date**	**Interest Rate**	**Cost**	**2010**
	Participant Loans	Various	4.25% to 10.00%	$ 305,723	$ 305,683
	Alger SmallCap & MidCap Growth A			65,032	79,954
	American Century Equity Income Adv			20,967	23,787
	American Funds Capital World G/I R3			98,517	110,745
	American Funds Growth Fund			149,825	173,737
	Artisan International Value			3,226	3,670
	Columbia Small Cap Value I Fund R3			12,226	14,018
	Davis NY Venture A			32,505	36,499
	Diamond Hill Large Cap A			34,395	39,312
	Fidelity Advisor Leveraged Co Stk - T			83,247	103,513
	Fidelity Advisor Small Cap T			39,712	47,655
	Guaranteed Portfolio Fund			230,067	240,780
	Janus Forty Class S			14,271	16,304
	Janus Overseas Funds S			161	191
	Lazard Emerging Markets Open			9,451	9,730
	Maxim Aggressive Profile II			522,924	615,339
	Maxim Bond Index			46,207	46,353
	Maxim Conservative Profile II			66,849	70,811
	Maxim Index 600			33,016	40,853
	Maxim Moderate Profile II			818,812	910,143
	Maxim Moderately Aggressive Profile II			49,335	55,646
	Maxim Moderately Conservative Profile II			16,769	17,643
	Maxim S&P 500 Index			40,930	47,785
	Maxim T. Rowe Price Mid-Cap Growth			6,345	7,270
	Maxim US Government Mortgage Securities			55,090	55,069
	MFS Value Fund A			27,323	31,296
	Perkins Mid Cap Value S			75,877	87,361
	Pimco Total Return Admin			87,388	89,177
	Thornburg International Value Fund R3			83,085	98,356
	TOTAL			$ 3,029,275	$ 3,378,680

Note: Column (a) is blank as there were no parties-in-interest.
Column (d) is blank as all investments are participant directed.