2022 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 803879

Entity Name: UNITED STATES SUGAR CORPORATION

FILED
Jul 18, 2022
Secretary of State
0210754693CC

Current Principal Place of Business:

111 PONCE DE LEON AVENUE CLEWISTON, FL 33440

Current Mailing Address:

111 PONCE DE LEON AVENUE CLEWISTON, FL 33440 US

FEI Number: 59-0490750 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KURTZ, LUKE 111 PONCE DE LEON AVENUE CLEWISTON, FL 33440 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PCEO, DIRECTOR Title SVP

Name BUKER, ROBERT H JR. Name WADE, MALCOLM SJR

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title SVP, CFO, TREASURER Title AT

Name WOOD, ELAINE M Name REIMER, DAVID

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title SECRETARY Title VP

Name KURTZ, LUKE Name MCDUFFIE, KEN

Address 111 PONCE DE LEON AVE Address 111 PONCE DE LEON AVE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title VP Title DIRECTOR

Name SMITH, NEIL Name KIRKPATRICK, FREDERICK S

Address 111 PONCE DE LEON AVE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID REIMER ASST TR 07/18/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BUTLER, JOHN K Name PETERSON, ERIC S

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR Title DIRECTOR

Name PETERSON, ROY E Name SANFORD, TIMOTHY C

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR Title DIRECTOR

Name WISELEY, TODD L Name WHITE, RIDGWAY H

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR Title DIRECTOR

Name WILKINS, HORACE JR. Name ARDISANA, LIZABETH

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440 City-State-Zip: CLEWISTON FL 33440

Title ASST. TREASURER Title VP

Name HOGAN, CARL Name STRINGER, CARL

Address 111 PONCE DE LEON AVENUE Address 111 PONCE DE LEON AVENUE

City-State-Zip: CLEWISTON FL 33440