

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 803879

**Entity Name:** UNITED STATES SUGAR CORPORATION**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  
Name BUKER, ROBERT H JR.  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title SVP, CFO, TREASURER  
Name WOOD, ELAINE M  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title VP  
Name KURTZ, LUKE  
Address 111 PONCE DE LEON AVE  
City-State-Zip: CLEWISTON FL 33440

Title VP  
Name SMITH, NEIL  
Address 111 PONCE DE LEON AVE  
City-State-Zip: CLEWISTON FL 33440

Title SVP, SECRETARY  
Name WADE, MALCOLM SJR  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title AT  
Name REIMER, DAVID  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title VP  
Name MCDUFFIE, KEN  
Address 111 PONCE DE LEON AVE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name KIRKPATRICK, FREDERICK S  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

**Continues on page 2**

*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****AT****02/10/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BUTLER, JOHN K  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name PETERSON, ROY E  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name PIPER, WILLIAM H  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name WHITE, RIDGWAY H  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name PETERSON, ERIC S  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name PIPER, W. ARCHIBALD  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name REUSS, LLOYD E  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440

Title DIRECTOR  
Name WILKINS, HORACE JR.  
Address 111 PONCE DE LEON AVENUE  
City-State-Zip: CLEWISTON FL 33440