

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 806015

Entity Name: GERBER PRODUCTS COMPANY

Current Principal Place of Business:

C/O NESTLE USA, INC.
1812 N MOORE ST
ARLINGTON, VA 22209

Current Mailing Address:

C/O NESTLE USA, INC
1812 N MOORE ST
ARLINGTON, VA 22209 US

FEI Number: 38-0558270

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 | SEC | Title | PRESIDENT, DIRECTOR |
| Name | GOLDBERG, KEVIN L | Name | PARTYKA, WILLIAM |
| Address | 1812 N MOORE ST | Address | 1812 N MOORE ST |
| City-State-Zip: | ARLINGTON VA 22209 | City-State-Zip: | ARLINGTON VA 22209 |
| | | | |
| Title | TREASURER | Title | DIRECTOR |
| Name | NEELY , ALEXANDRA | Name | CARVALHO, RYAN |
| Address | 1812 N MOORE ST | Address | 1812 N MOORE ST |
| City-State-Zip: | ARLINGTON VA 22209 | City-State-Zip: | ARLINGTON VA 22209 |
| | | | |
| Title | ASST. TREASURER | Title | ASST. TREASURER |
| Name | KUMAR, PRAVEEN | Name | GRIESSE, ROBERT |
| Address | 1812 N MOORE ST | Address | 30003 BAINBRIDGE RD |
| City-State-Zip: | ARLINGTON VA 22209 | City-State-Zip: | SOLON OH 44139 |
| | | | |
| Title | ASST. TREASURER | Title | OFFICER |
| Name | PASETSKY, ALAN | Name | BINDER, DAVID |
| Address | 1812 N MOORE ST | Address | 1812 N MOORE ST |
| City-State-Zip: | ARLINGTON VA 22209 | City-State-Zip: | ARLINGTON VA 22209 |

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: ROBERT GRIESSE

ASSISTANT TREASURER 04/16/2020

Electronic Signature of Signing Officer/Director Detail

Date