

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 817227

**Entity Name:** N.P. DODGE COMPANY

**Current Principal Place of Business:**

8701 WEST DODGE ROAD  
SUITE 300  
OMAHA, NE 68114

**FILED**  
**Jan 23, 2023**  
**Secretary of State**  
**6442082108CC**

**Current Mailing Address:**

8701 WEST DODGE ROAD  
SUITE 300  
OMAHA, NE 68114 US

**FEI Number:** 47-0144420

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CHAIRPERSON, PRESIDENT,  
DIRECTOR  
Name DODGE, N P III  
Address 8701 WEST DODGE ROAD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title DIRECTOR  
Name DODGE, KATHLEEN C  
Address 8701 WEST DODGE ROAD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title DIRECTOR  
Name DODGE, N P JR.  
Address 8701 WEST DODGE ROAD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title COO, SECRETARY, DIRECTOR  
Name TILGNER, DINA R  
Address 8701 WEST DODGE ROAD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title CFO  
Name SVOBODA, DAN  
Address 8701 WEST DODGE ROAD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title DIRECTOR  
Name ALTENAU, JENNIFER D.  
Address 8701 WEST DODGE RD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title DIRECTOR  
Name BRABEC, DANIEL J  
Address 8701 WEST DODGE RD, SUITE 300  
City-State-Zip: OMAHA NE 68114

Title DIRECTOR  
Name LUTHER, LAURA DODGE  
Address 8701 WEST DODGE RD, SUITE 300  
City-State-Zip: OMAHA NE 68114

*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:** DINA R. TILGNER

**COO, SECRETARY,  
DIRECTOR**

**01/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date