

2024 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

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, CEO, 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 PRESIDENT, 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

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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: DINA R. TILGNER

PRESIDENT

01/16/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILSON, RANDY L.
Address 8701 WEST DODGE RD, SUITE 300
City-State-Zip: OMAHA NE 68114