2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825870

Entity Name: KEWAUNEE SCIENTIFIC CORPORATION

FILED
Mar 09, 2018
Secretary of State
CC6980819177

Current Principal Place of Business:

2700 W FRONT ST
STATESVILLE, NC 28677

Current Mailing Address:

PO BOX 1842
STATESVILLE, NC 28687 US

FEI Number: 38-0715562

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH 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	DIRECTOR
Name	SHUMAKER, WILLIAM A
Address	2700 W FRONT ST
City-State-Zip:	STATESVILLE NC 28677

Title	VP
Name	DAHLGREN, DANA L
Address	2700 W. FRONT ST.
City-State-Zip:	STATESVILLE NC 28677

Title	VP
Name	PHILLIPS, ELIZABETH D
Address	2700 W. FRONT ST.
City-State-Zip:	STATESVILLE NC 28677

Title	VICE PRESIDENT
Name	ROK, MICHAEL G
Address	2700 WEST FRONT STREET
City-State-Zip:	STATESVILLE NC 28677

Title	CFO, VP FINANCE
Name	HULL, THOMAS D III
Address	2700 WEST FRONT ST.
City-State-Zip:	STATESVILLE NC 28677

Title	VP
Name	RINDOKS, KURT P
Address	2700 W FRONT ST
City-State-Zip:	STATESVILLE NC 28677

Title	PRESIDENT/CEO/DIRECTOR
Name	RAUSCH, DAVID M.
Address	2700 WEST FRONT STREET
City-State-Zip:	STATESVILLE NC 28677

Title	DIRECTOR
Name	PYLE, MARGARET B
Address	4806 BATZ ROAD
City-State-Zip:	WESTPORT WI 53597

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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: THOMAS D HULL 111 CFO 03/09/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	RHIND, DAVID S.
Address	641 WEST WILLOW STREET NO. 139
City-State-Zip:	CHICAGO IL 60614

Title	DIRECTOR
Name	SHAW, DONALD F
Address	662 EAST SUNBURTS LANE
City-State-Zip:	TEMPE AZ 85284

Title	DIRECTOR
Name	RUSSELL, JOHN D.
Address	2331 MOHAWK LANE
City-State-Zip:	GLENVIEW IL 60026

Title	DIRECTOR
Name	GEHL, KEITH M
Address	588 SANDRINGHAM PLACE
City-State-Zip:	CONCORD NC 28078