

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 828723

**Entity Name:** C.H. ROBINSON COMPANY

**Current Principal Place of Business:**

14701 CHARLSON RD.  
1400  
EDEN PRAIRIE, MN 55347

**Current Mailing Address:**

14701 CHARLSON RD.  
1400  
EDEN PRAIRIE, MN 55347 US

**FEI Number:** 41-0680048

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 P  
Name WIEHOFF, JOHN P  
Address 14701 CHARLSON ROAD, SUITE 1400  
City-State-Zip: EDEN PRAIRIE MN 55347

Title CD  
Name WIEHOFF, JOHN P  
Address 14701 CHARLSON ROAD, SUITE 1400  
City-State-Zip: EDEN PRAIRIE MN 55347

Title T  
Name RENNER, TROY  
Address 14701 CHARLSON ROAD, SUITE 1400  
City-State-Zip: EDEN PRAIRIE MN 55347

Title VDS  
Name CAMPBELL, BEN  
Address 14701 CHARLSON ROAD, SUITE 1400  
City-State-Zip: EDEN PRAIRIE MN 55347

Title VP  
Name LEMKE, JAMES  
Address 14701 CHARLSON RD.  
1400  
City-State-Zip: EDEN PRAIRIE MN 55347

Title ASST. SECRETARY  
Name GERST, CHRIS  
Address 14701 CHARLSON RD.  
1400  
City-State-Zip: EDEN PRAIRIE MN 55347

*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:** TROY RENNER

**TREASURER**

**04/08/2016**

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

\_\_\_\_\_  
Date