

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 841495

**Entity Name:** ROSEMOUNT INC.**Current Principal Place of Business:**6021 INNOVATION BLVD.  
SHAKOPEE, MN 55379**Current Mailing Address:**6021 INNOVATION BLVD.  
SHAKOPEE, MN 55379 US**FEI Number:** 41-0766812**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 DIRECTOR, PRESIDENT  
Name BUMGARNER, MARC D  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title DIRECTOR  
Name STOKES, JON D  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title DIRECTOR, VP  
Name SWEENEY, MATTHEW J  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title SECRETARY  
Name CHELESNIK, STEVEN A  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title VP  
Name GRAVES, RICHARD  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title VP  
Name YAP, PAMELA  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

Title VP  
Name ZANON, SAMANTHA  
Address 6021 INNOVATION BLVD.  
City-State-Zip: SHAKOPEE MN 55379

*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: STEVEN A CHELESNIK****SECRETARY****04/21/2023**

Electronic Signature of Signing Officer/Director Detail

Date