

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848256

Entity Name: CARGILL JUICE NORTH AMERICA, INC.**Current Principal Place of Business:**15407 MCGINTY RD W
WAYZATA, MN 55391**Current Mailing Address:**15407 MCGINTY RD W MS149 FSS-RIM
WAYZATA, MN 55391 US**FEI Number:** 41-1262003**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 P
Name ABRAHAMSON, THOMAS P
Address 15407 MCGINTY ROAD W MS26
City-State-Zip: WAYZATA MN 55391

Title DIRECTOR
Name SIKES, JAMES BRIAN
Address 15615 MCGINTY ROAD W MS26
City-State-Zip: WAYZATA MN 55391

Title AS
Name SCHULTENOVER, TRACY
Address 15407 MCGINTY RD W MS26
City-State-Zip: WAYZATA MN 55391

Title DIRECTOR
Name HALL, TODD B
Address 15407 MCGINTY ROAD W, MS26
City-State-Zip: WAYZATA MN 55391

Title T
Name OLSON, JAYME D
Address 15615 MCGINTY RD W MS26
City-State-Zip: WAYZATA MN 55391

Title SECRETARY
Name KROESE, JAY A
Address 15615 MCGINTY ROAD W MS26
City-State-Zip: WAYZATA MN 55391

Title DIRECTOR
Name CHASE, JULIAN E
Address 15407 MCGINTY ROAD W, MS26
City-State-Zip: WAYZATA MN 55391

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: TRACY SCHULTENOVER**ASSISTANT SECRETARY** 04/27/2018

Electronic Signature of Signing Officer/Director Detail

Date