

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853713

Entity Name: ANDERSON PRODUCTS, INC.**Current Principal Place of Business:**1100 OLD HIGHWAY 8 NW
NEW BRIGHTON, MN 55112**Current Mailing Address:**1100 OLD HIGHWAY 8 NW
NEW BRIGHTON, MN 55112 US**FEI Number:** 41-0670985**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 ASSISTANT TREASURER
Name HATFIELD, SCOTT
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title ASSISTANT TREASURER
Name POLOVITZ, MARK
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title CFO
Name LYDON, THOMAS A.
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title TREASURER
Name LYDON, THOMAS A.
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title DIRECTOR
Name BECKER, RUSSELL A.
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title SECRETARY
Name LYDON, THOMAS A.
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title VP
Name FINN, REID A
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

Title VP
Name LUCIA, TONY
Address 1100 OLD HIGHWAY 8 NW
City-State-Zip: NEW BRIGHTON MN 55112

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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: SCOTT HATFIELD

ASSISTANT TREASURER 05/26/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LYDON, THOMAS A.
Address	1100 OLD HIGHWAY 8 NW
City-State-Zip:	NEW BRIGHTON MN 55112