

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003075

Entity Name: CONVERSE INC.

Current Principal Place of Business:

ONE HIGH STREET
NORTH ANDOVER, MA 01845-2601

Current Mailing Address:

ONE HIGH STREET
NORTH ANDOVER, MA 01845-2601

FEI Number: 52-2296884

Certificate of Status Desired: No

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 CEO, PRESIDENT, DIRECTOR
Name CALHOUN, JAMES A JR.
Address ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845

Title CFO, VP, TREASURER, DIRECTOR
Name WOODRUFF, ROBERT W
Address ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845

Title SECRETARY, VP
Name MILLER, ANN M
Address ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845

Title DIR, ASST. SECRETARY
Name COBURN, JOHN F III
Address C/O ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845

Title DIR, ASST. SECRETARY
Name HANSON, GRANT W
Address C/O ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845

Title ASST. TREASURER
Name BOYD, TINA M
Address ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845-2601

Title ASST. SECRETARY
Name DUGAN, MELISSA
Address ONE HIGH STREET
City-State-Zip: NORTH ANDOVER MA 01845-2601

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: ANN M MILLER

SECRETARY

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date