

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003307

Entity Name: JOHN DEERE CONSTRUCTION & FORESTRY COMPANY**Current Principal Place of Business:**ONE JOHN DEERE PLACE
C/O DEERE & CO. TAX DEPT
MOLINE, IL 61265**Current Mailing Address:**ONE JOHN DEERE PLACE
C/O DEERE & CO TAX DEPT
MOLINE, IL 61265**FEI Number:** 36-2673913**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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	PRESIDENT
Name	CAMPBELL, RYAN D
Address	ONE JOHN DEERE PLACE C/O DEERE & CO. TAX DEPT
City-State-Zip:	MOLINE IL 61265

Title	VP
Name	DALY, JASON T
Address	ONE JOHN DEERE PLACE C/O DEERE & CO. TAX DEPT
City-State-Zip:	MOLINE IL 61265

Title	TREASURER
Name	TRAHAN, JEFFREY A
Address	ONE JOHN DEERE PLACE
City-State-Zip:	MOLINE IL 61265

Title	SECRETARY
Name	BERK, EDWARD R
Address	ONE JOHN DEERE PLACE
City-State-Zip:	MOLINE IL 61265

Title	DIRECTOR
Name	CAMPBELL, RYAN D
Address	ONE JOHN DEERE PLACE
City-State-Zip:	MOLINE IL 61265

Title	DIRECTOR
Name	BUHR, TOM A
Address	ONE JOHN DEERE PLACE
City-State-Zip:	MOLINE IL 61265

Title	DIRECTOR
Name	RAUCH, BRIAN J
Address	ONE JOHN DEERE PLACE
City-State-Zip:	MOLINE IL 61265

Title	ASSISTANT SECRETARY
Name	POWERS, ANTHONY
Address	ONE JOHN DEERE PLACE C/O DEERE & CO. TAX DEPT
City-State-Zip:	MOLINE IL 61265

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: ANTHONY POWERS**ASSISTANT SECRETARY** 03/05/2024

Electronic Signature of Signing Officer/Director Detail

Date