

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003926

Entity Name: D+H USA CORPORATION**Current Principal Place of Business:**605 CRESCENT EXECUTIVE CT.
SUITE 600
LAKE MARY, FL 32746**Current Mailing Address:**400 SW 6TH AVENUE
SUITE 200/CORPORATE LEGAL
PORTLAND, OR 97204 US**FEI Number:** 93-0704365**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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	DIRECTOR / CEO
Name	SCHMID, GERRARD B.
Address	939 EGLINTON AVENUE EAST SUITE 201
City-State-Zip:	TORONTO ONTARIO M4G 4H7

Title	DIRECTOR / PRESIDENT
Name	NEVILLE, WILLIAM W.
Address	605 CRESCENT EXECUTIVE COURT SUITE 600
City-State-Zip:	LAKE MARY FL 32746

Title	CFO
Name	CUMMINS, ERIC
Address	605 CRESCENT EXECUTIVE COURT SUITE 600
City-State-Zip:	LAKE MARY FL 32746

Title	VP / TREASURER
Name	SHATKA, JOHN
Address	939 EGLINTON AVENUE EAST SUITE 201
City-State-Zip:	TORONTO ONTARIO M4G 4H7

Title	DIRECTOR / EVP / SECRETARY
Name	WEAVER, KAREN H.
Address	939 EGLINTON AVENUE EAST SUITE 201
City-State-Zip:	TORONTO ONTARIO M4G 4H7

Title	DIRECTOR
Name	CALDWELL, DAVID A.
Address	939 EGLINTON AVENUE EAST SUITE 201
City-State-Zip:	TORONTO ONTARIO M4G 4H7

Title	ASSISTANT SECRETARY
Name	RABENOLD, KEITH M.
Address	312 PLUM STREET
City-State-Zip:	CINCINNATI OH 45202

Title	CHAIRWOMAN
Name	COSTELLO, ELLEN M
Address	111 W. MUNROE STREET 2E
City-State-Zip:	CHICAGO IL 60603

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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: KEITH M. RABENOLD**ASSISTANT SECRETARY** 02/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HEIDEN, CARA K
Address	12911 TIMBERLINE DRIVE
City-State-Zip:	URBANDALE IA 50323