

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001480

**FILED
Apr 20, 2018
Secretary of State
CC2734593351**

Entity Name: HUSQVARNA CONSTRUCTION PRODUCTS NORTH AMERICA, INC.

Current Principal Place of Business:

9335 HARRIS CORNERS PARKWAY
SUITE 500
CHARLOTTE, NC 28269

Current Mailing Address:

9335 HARRIS CORNERS PARKWAY
SUITE 500
CHARLOTTE, NC 28269 US

FEI Number: 26-1596275

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 TREASURER AND CFO
Name NOETH, CHRIS
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title PRESIDENT AND MD, DIRECTOR
Name CHAMBERLIN, STEVE
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title DIRECTOR
Name YTTERBERG, JAN
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title SECRETARY, VP AND GC
Name JACOBSON, JILL
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title DIRECTOR
Name ANDERSSON, HENRIC
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title VP
Name TESCH, ROBERT
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title ASST. SECRETARY
Name STANFIELD, JOHN
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

Title ASST. SECRETARY
Name BLASE, GARY
Address 9335 HARRIS CORNERS PARKWAY
 SUITE 500
City-State-Zip: CHARLOTTE NC 28269

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: JILL JACOBSON

SECRETARY, VP AND GC 04/20/2018

Electronic Signature of Signing Officer/Director Detail

Date