

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001570

Entity Name: DENTSPLY SIRONA INC.**Current Principal Place of Business:**SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
YORK, PA 17405**Current Mailing Address:**SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
YORK, PA 17405 US**FEI Number:** 39-1434669**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 DIRECTOR
Name ALFANO, MICHAEL C.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name COLEMAN, MICHAEL J.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name LUNGER, FRANCIS J.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name MICLOT, JOHN L.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name BRANDT, ERIC K.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name DEESE, WILLIE A.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title TREASURER
Name REARDON, WILLIAM E.
Address 221 WEST PHILADELPHIA ST
SUITE 60W
City-State-Zip: YORK PA 17401

Title DIRECTOR
Name KOWALOFF, ARHUR D.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

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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: JONATHAN I. FRIEDMAN**SECRETARY****01/17/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BEEKEN, DAVID K.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title CHIEF FINANCIAL OFFICER
Name ULRICH, MICHEL
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title DIRECTOR
Name JANSEN KRAEMER, HARRY M. JR.
Address SUSQUEHANNA COMMERCE CENTER
221 WEST PHILADELPHIA ST
City-State-Zip: YORK PA 17405

Title SECRETARY
Name FRIEDMAN, JONATHAN I.
Address 3030 47TH AVENUE
#500
City-State-Zip: LONG ISLAND CITY NY 11101