

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003355

Entity Name: OSHKOSH CORPORATION**Current Principal Place of Business:**1917 FOUR WHEEL DRIVE
OSHKOSH, WI 54902**Current Mailing Address:**1917 FOUR WHEEL DRIVE
OSHKOSH, WI 54902 US**FEI Number:** 39-0520270**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, CEO, DIRECTOR
Name JONES, WILSON R
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title EVP
Name JOHNSON, JAMES W
Address 2600 AMERICAN DRIVE
City-State-Zip: APPLETON WI 54915

Title EVP
Name NERENHAUSEN, FRANK R
Address 13712 CRAYTON BOULEVARD
City-State-Zip: HAGERSTOWN MD 21742

Title SVP, T
Name GRENNIER, R. SCOTT
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title AS
Name MACKEY, LORI R
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title D
Name NEWLIN, STEPHEN D
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title D
Name OMTVEDT, CRAIG P
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title D
Name PALMER, DUNCAN J
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

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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: IGNACIO A. CORTINA**EVP AND SECRETARY****04/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name SHIELY, JOHN S
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title SECRETARY
Name CORTINA, IGNACIO A.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title DIRECTOR
Name METCALF-KUPRES, KIMBERLEY
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title DIRECTOR
Name JORDAN, TYRONE M.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title DIRECTOR
Name ROWLAND, SANDRA E.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title DIRECTOR
Name ALLMAN, KEITH J.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title SENIOR VICE PRESIDENT, FINANCE
AND CONTROLLER
Name FREEDERS, JAMES C
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title CFO
Name PACK, MICHAEL E.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902

Title DIRECTOR
Name ODIERNO, RAYMOND T.
Address 1917 FOUR WHEEL DRIVE
City-State-Zip: OSHKOSH WI 54902