

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004277

Entity Name: CARGILL COMMODITY SERVICES INC.**Current Principal Place of Business:**15407 MCGINTY RD W
WAYZATA, MN 55391**Current Mailing Address:**15407 MCGINTY RD W
WAYZATA, MN 55391**FEI Number:** 41-1935954**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 P
Name PETERSON, DARRIN P
Address 15407 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title V
Name BURLEY, JASON
Address 15407 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title V
Name GARVERT, TERRY
Address 15407 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title S
Name KROSES, JAY A
Address 15615 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title T
Name OLSON, JAYME D
Address 15615 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title AS
Name DECLARK, ROBERT
Address 15407 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

Title ASSISTANT SECRETARY
Name WARD, LORI
Address 15407 MCGINTY RD W
City-State-Zip: WAYZATA MN 55391

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: LORI WARD**ASSISTANT SECRETARY** 05/14/2015_____
Electronic Signature of Signing Officer/Director Detail_____
Date