

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000005409

Entity Name: CARIBOU COFFEE COMPANY, INC.

Current Principal Place of Business:

3900 LAKEBREEZE AVENUE NORTH
MINNEAPOLIS, MN 55429

Current Mailing Address:

3900 LAKEBREEZE AVENUE NORTH
MINNEAPOLIS, MN 55429

FEI Number: 41-1731219

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 PRESIDENT
Name TATTERSFIELD, MICHAEL
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title SECRETARY
Name LEE, DAN E
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title CFO
Name HENNESSY, TIMOTHY J
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name RAINKO, KELLY DARIN
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name VALETTE, JEAN-MICHEL
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name DENO, DAVID
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name GRAVES, GARY
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name GOUDET, OLIVER
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

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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: TIMOTHY J. HENNESSY

**CHIEF FINANCIAL
OFFICER**

04/21/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BECHT, BART
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title DIRECTOR
Name HARF, PETER
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429

Title TREASURER
Name JENSEN, MIKE
Address 3900 LAKEBREEZE AVENUE NORTH
City-State-Zip: MINNEAPOLIS MN 55429