

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000001402

**Entity Name:** AGILE PURSUITS, INC.**Current Principal Place of Business:**1 PROCTER & GAMBLE PLAZA  
CINCINNATI, OH 45202**Current Mailing Address:**P.O. BOX 599, C10-TAX  
CINCINNATI, OH 45201 US**FEI Number:** 38-3760479**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION  
1200 S PINE ISLAND RD #250  
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 DIR/PRES  
Name MONICA, TURNER  
Address 1 PROCTER & GAMBLE PLAZA  
TAX  
City-State-Zip: CINCINNATI OH 45202

Title ASST  
Name ROSENFELD, ERIK  
Address 1 PROCTER & GAMBLE PLAZA  
TAX DIVISON, C10  
City-State-Zip: CINCINNATI OH 45202

Title VP/TREA  
Name FOWLER, TADD A  
Address 1 PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202

Title VP  
Name FOWLER, TADD  
Address 1 PROCTER & GAMBLE PLAZA  
TREASURY, C-10  
City-State-Zip: CINCINNATI OH 45202

Title DIR/VP  
Name SCHULTEN, ANDRE  
Address 1 PROCTER & GAMBLE PLAZA  
C10 - TAX  
City-State-Zip: CINCINNATI OH 45202

Title ASST. SEC  
Name STADELMANN, REBECCA  
Address 1 PROCTER & GAMBLE PLAZA  
TAX DIVISION, C10  
City-State-Zip: CINCINNATI OH 45202

*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:** REBECCA STADELMANN

SR DIRECTOR NA TAX

03/23/2022

Electronic Signature of Signing Officer/Director Detail

Date