2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001401

Entity Name: DRISCOLL'S, INC.

Current Principal Place of Business:

345 WESTRIDGE DRIVE WATSONVILLE, CA 95076

Current Mailing Address:

ATTN: TAX DEPARTMENT

P.O. BOX 50045

WATSONVILLE, CA 95077 US

FEI Number: 94-1237296 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

FILED Apr 16, 2024

Secretary of State

5540990863CC

Officer/Director Detail:

Title CFO Title EXECUTIVE CHAIRMAN, DIRECTOR

Name TANDON, SANJEEV Name REITER, J MILES

Address PO BOX 50045 Address PO BOX 50045

City-State-Zip: WATSONVILLE CA 95077 City-State-Zip: WATSONVILLE CA 95077

VC, DIRECTOR Title Title **SECRETARY**

Name REITER, GARLAND S Name O'BRIEN, THOMAS A

PO BOX 50045 PO BOX 50045 Address Address

City-State-Zip: WATSONVILLE CA 95077 WATSONVILLE CA 95077 City-State-Zip:

Title DIRECTOR Title DIRECTOR Name DEFEO, NEIL P Name ATKIN, JOHN C Address PO BOX 50045 PO BOX 50045 Address

City-State-Zip: WATSONVILLE CA 95077 WATSONVILLE CA 95077 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name PETROVICH, DUSHAN (DUKE) Name MERCADO, MANUEL

Address PO BOX 50045 Address PO BOX 50045

City-State-Zip: WATSONVILLE CA 95077 City-State-Zip: WATSONVILLE CA 95077

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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: CHRISTINE DZWONCZYK

TREASURER

04/16/2024

Officer/Director Detail Continued:

Title DIRECTOR

Name ALVAREZ, GIANNELLA

Address PO BOX 50045

City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR

Name SMITH, BRIE REITER

Address P.O. BOX 50045

City-State-Zip: WATSONVILLE CA 95077

Title CEO, DIRECTOR
Name BJORN, SOREN
Address P.O. BOX 50045

City-State-Zip: WATSONVILLE CA 95077

Title TREASURER

Name DZWONCZYK, CHRISTINE

Address P.O. BOX 50045

City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR

Name REITER, ERIC

Address P.O. BOX 50045

City-State-Zip: WATSONVILLE CA 95077