

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005825

Entity Name: DEERE & COMPANY**Current Principal Place of Business:**ONE JOHN DEERE PLACE
MOLINE, IL 61265**Current Mailing Address:**ONE JOHN DEERE PLACE
C/O TAX DEPT
MOLINE, IL 61265**FEI Number:** 36-2382580**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 S. 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
Name MAY, JOHN C
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title TREASURER
Name TRAHAN, JEFFREY A
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title ASST. SECRETARY
Name RUBINO, MICHAEL C
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title DIRECTOR
Name PAGE, GREGORY R
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title VP
Name JEPSSEN, JOSHUA A
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title SECRETARY
Name BERK, EDWARD R
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title DIRECTOR
Name JONES, CLAYTON M
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title DIRECTOR
Name SMITH, SHERRY M
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

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: MICHAEL RUBINO**ASST SECRETARY****04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date