

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001135

Entity Name: SIGMA-ALDRICH, INC.

Current Principal Place of Business:

3050 SPRUCE STREET
ST. LOUIS, MO 63103

FILED
Jan 30, 2020
Secretary of State
3846515268CC

Current Mailing Address:

400 SUMMIT DRIVE
TAX DEPT.5TH FLOOR
BURLINGTON, MA 01803 US

FEI Number: 43-1742718

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 PRES, DIRECTOR
Name ROSS, CHRISTOS
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title TRES, DIRECTOR, VP
Name ELLIOTT, MONICA
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title SEC, VP
Name HUTCHINSON, DAVID P
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title VP
Name HORN, MARC
Address 400 SUMMIT DR
City-State-Zip: BURLINGTON MA 01803

Title VP
Name BISCHOFF, KLAUS
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title VP
Name BULPIN, ANDREW
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title VP
Name TRASATTI, MICHAEL
Address 3050 SPRUCE STREET
City-State-Zip: ST. LOUIS MO 63103

Title VP
Name CONNOLLY, RENEE
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

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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: PAUL O'CONNOR

ASSISTANT TREASURER 01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name HUBBARD, JOHN DANA
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title ASST. SECRETARY
Name MILEWICH, DANIEL
Address 400 SUMMIT DR
City-State-Zip: BURLINGTON MA 01803

Title VP
Name WIRTH, JEAN-CHARLES
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803

Title ASST. TREASURER
Name O'CONNOR, PAUL
Address 400 SUMMIT DR
City-State-Zip: BURLINGTON MA 01803

Title VP
Name STONE, WARREN
Address 400 SUMMIT DR
City-State-Zip: BURLINGTON MA 01803

Title VP
Name ALBERT, YVONNE
Address 400 SUMMIT DRIVE
City-State-Zip: BURLINGTON MA 01803