

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06472

Entity Name: CARGILL KITCHEN SOLUTIONS, INC.**Current Principal Place of Business:**15407 MCGINTY RD
WAYZATA, MN 55391**Current Mailing Address:**15407 MCGINTY RD W MS149 FSS-RIM
WAYZATA, MN 55391 US**FEI Number:** 41-1518244**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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	PRES
Name	SIKES, JAMES B
Address	15407 MCGINTY RD W MS26
City-State-Zip:	WAYZATA MN 55391

Title	SECRETARY
Name	KROESE, JAY A
Address	15407 MCGINTY ROAD W MS26
City-State-Zip:	WAYZATA MN 55391

Title	TREA
Name	OLSON, JAYME D
Address	15407 MCGINTY ROAD W MS26
City-State-Zip:	WAYZATA MN

Title	AS
Name	SCHULTENOVER, TRACY
Address	15407 MCGINTY RD W MS26
City-State-Zip:	WAYZATA MN 55391

Title	D
Name	KEATING, JOHN A
Address	15407 MCGINTY RD. W MS26
City-State-Zip:	WAYZATA MN 55391

Title	DIRECTOR
Name	SIKES, JAMES BRIAN
Address	15407 MCGINTY RD W MS26
City-State-Zip:	WAYZATA MN 55391

Title	DIRECTOR
Name	STAHL, TREVOR T
Address	15407 MCGINTY RD W MS26
City-State-Zip:	WAYZATA MN 55391

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: TRACY SCHULTENOVER**ASSISTANT SECRETARY** 04/27/2018_____
Electronic Signature of Signing Officer/Director Detail_____
Date