

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002546

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** PERNOD RICARD AMERICAS TRAVEL RETAIL INC.

**Current Principal Place of Business:**

100 MANHATTANVILLE RD.  
PURCHASE, NY 10577

**New Principal Place of Business:**

**Current Mailing Address:**

100 MANHATTANVILLE RD.  
PURCHASE, NY 10577

**New Mailing Address:**

PERNOD RICARD LEGAL DEPARTMENT  
100 MANHATTANVILLE ROAD  
PURCHASE, NY 10577

**FEI Number:** 26-2741251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PC  
**Name:** DUFFY, PAUL  
**Address:** 100 MANHATTANVILLE RD.  
**City-St-Zip:** PURCHASE, NY 10577

**Title:** MR  
**Name:** CUNY, THIBAUT  
**Address:** 100 MANHATTANVILLE RD.  
**City-St-Zip:** PURCHASE, NY 10577

**Title:** MR  
**Name:** LEMARIE, CHRISTOPHE  
**Address:** 100 MANHATTANVILLE RD.  
**City-St-Zip:** PURCHASE, NY 10577

**Title:** AS  
**Name:** MAYERS, SHARON  
**Address:** 2072 RIVERSIDE DR. EAST  
**City-St-Zip:** WINDSOR ON N8Y 4S5,

**Title:** S  
**Name:** MCNERNEY, CAROLYN  
**Address:** 100 MANHATTANVILLE RD.  
**City-St-Zip:** PURCHASE, NY 10577

**Title:** AT  
**Name:** GEMMA, JOHN  
**Address:** 100 MANHATTANVILLE RD.  
**City-St-Zip:** PURCHASE, NY 10577

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:** SHARON MAYERS

AS

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date