

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066765

Entity Name: DOLE BERRY COMPANY**Current Principal Place of Business:**1900 5TH ST NW
WINTER HAVEN, FL 33881**Current Mailing Address:**PO BOX 3036
WINTER HAVEN, FL 33885**FEI Number:** 59-3403064**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	DIRECTOR, VP, TREASURER
Name	MALMQVIST, JOHAN
Address	ONE DOLE DRIVE
City-State-Zip:	WESTLAKE VILLAGE CA 91362

Title	VP, SECRETARY
Name	GALE, JARED
Address	ONE DOLE DRIVE
City-State-Zip:	WESTLAKE VILLAGE CA 91362

Title	VP
Name	ESBAN, JAY
Address	ONE DOLE DRIVE
City-State-Zip:	WESTLAKE VILLAGE CA 91362

Title	DIRECTOR, PRESIDENT
Name	LINDEN, JOHAN
Address	ONE DOLE DRIVE
City-State-Zip:	WESTLAKE VILLAGE CA 91362

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: JARED GALE

VP & SECRETARY

04/02/2018

Electronic Signature of Signing Officer/Director Detail_____
Date