

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 800788

Entity Name: E.I. DU PONT DE NEMOURS AND COMPANY**Current Principal Place of Business:**974 CENTRE ROAD
CHESNUT RUN PLAZA
WILMINGTON, DE 19805**Current Mailing Address:**974 CENTRE ROAD
WILMINGTON, DE 19805 US**FEI Number:** 51-0014090**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	CEO, DIRECTOR
Name	JAMES, COLLINS C
Address	974 CENTRE ROAD P.O. BOX 2915
City-State-Zip:	WILMINGTON DE 19805

Title	SECRETARY, VP
Name	CORNEL, B FUERER
Address	974 CENTRE ROAD P.O. BOX 2915
City-State-Zip:	WILMINGTON DE 19805

Title	TREASURER, VP
Name	LAURIE, CONSLATO A
Address	1007 MARKET STREET
City-State-Zip:	WILMINGTON DE 19898

Title	ASST. TREASURER
Name	TUINSTRA, ROBERT J
Address	974 CENTRE ROAD P.O. BOX 2915
City-State-Zip:	WILMINGTON DE 19805

Title	CFO, VP
Name	GREGORY, R FRIEDMAN
Address	974 CENTRE ROAD
City-State-Zip:	WILMINGTON DE 19805

Title	ASST. SECRETARY
Name	ERLENBAUGH, ROBIN
Address	974 CENTRE ROAD
City-State-Zip:	WILMINGTON DE 19805

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: ROBERT J TUINSTRA

ASSISTANT TREASURER 04/15/2021

Electronic Signature of Signing Officer/Director Detail_____
Date