

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000003397

**Entity Name:** DOLE FOOD COMPANY, INC.**Current Principal Place of Business:**200 S. TRYON STREET  
SUITE 600  
CHARLOTTE, NC 28202**Current Mailing Address:**200 S. TRYON STREET  
SUITE 600  
CHARLOTTE, NC 28202 US**FEI Number:** 99-0035300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS ST  
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 VP, CFO  
Name MALMQVIST, JOHAN L.  
Address 200 S. TRYON STREET, SUITE 600  
City-State-Zip: CHARLOTTE NC 28202

Title VP, SECRETARY  
Name GALE, JARED  
Address 200 S. TRYON STREET  
SUITE 600  
City-State-Zip: CHARLOTTE NC 28202

Title PRES, CEO  
Name LINDEN, JOHAN A.  
Address 200 S. TRYON STREET, SUITE 600  
SUITE 600  
City-State-Zip: CHARLOTTE NC 28202

Title DIR, CHAIRMAN  
Name MURDOCK, DAVID H  
Address ONE DOLE DRIVE  
City-State-Zip: WESTLAKE VILLAGE CA 91362

Title DIRECTOR  
Name WIEMAN, ROBERTA  
Address ONE DOLE DRIVE  
City-State-Zip: WESTLAKE VILLAGE CA 91362

Title TREASURER  
Name DESPAIN, JAMES  
Address 200 S. TRYON STREET, SUITE 600  
City-State-Zip: CHARLOTTE NC 28202

Title CONTROLLER  
Name MASON, ROBERT  
Address 200 S. TRYON STREET, SUITE 600  
City-State-Zip: CHARLOTTE NC 28202

*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 R. GALE**CORPORATE  
SECRETARY****04/30/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date