

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005560

Entity Name: TOMRA OF NORTH AMERICA, INC.**Current Principal Place of Business:**ONE CORPORATE DRIVE, SUITE 710
SHELTON, CT 06484**Current Mailing Address:**ONE CORPORATE DRIVE, SUITE 710
SHELTON, CT 06484 US**FEI Number:** 06-1362037**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH 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 CD
Name RANSTRAND, STEFAN
Address DRENGSRUDHAGEN 2
P.O. BOX 278
City-State-Zip: ASKER NORWAY N-1372

Title CFO, TREASURER
Name HOLLYER, ANDY
Address ONE CORPORATE DRIVE, SUITE 710
City-State-Zip: SHELTON CT 06484

Title SVP
Name ARGENIO, ERNIE
Address ONE CORPORATE DRIVE, SUITE 710
City-State-Zip: SHELTON CT 06484

Title D
Name GUNDERSEN, ESPEN
Address DRENGSRUDHAGEN 2, P.O. BOX 278
City-State-Zip: N-1372 ASKER, NORWAY XXX

Title CEOP
Name BEVERS, HEINER
Address ONE CORPORATE DRIVE, SUITE 710
City-State-Zip: SHELTON CT 06484

Title ASSISTANT TREASURER
Name MATTO, JEFFREY
Address ONE CORPORATE DRIVE, SUITE 710
City-State-Zip: SHELTON CT 06484

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: ANDY HOLLYER**TREASURER****03/02/2018**

Electronic Signature of Signing Officer/Director Detail

Date