

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000950

Entity Name: 5.11, INC.**Current Principal Place of Business:**3201 NORTH AIRPORT WAY
MANTECA, CA 95336**Current Mailing Address:**3201 NORTH AIRPORT WAY
MANTECA, CA 95336 US**FEI Number:** 61-1443499**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 PRESIDENT
Name MORALES, FRANCISCO JAVIER
Address 1360 REYNOLDS AVE
 SUITE 101
City-State-Zip: IRVINE CA 92614

Title DIRECTOR
Name SAWTELLE, ZACHARY TAYLOR
Address 2010 MAIN STREET
 SUITE 1220
City-State-Zip: IRVINE CA 92614

Title DIRECTOR
Name HYDE, MATTHEW LATTA
Address 3201 NORTH AIRPORT WAY
City-State-Zip: MANTECA CA 95336

Title TREASURER
Name MCGINTY, JAMES JOHN
Address 1360 REYNOLDS AVE, STE 101
City-State-Zip: IRVINE CA 92614

Title SECRETARY
Name WICKS, JOHN FAIRBANKS
Address 3201 NORTH AIRPORT WAY
City-State-Zip: MANTECA CA 95336

Title DIRECTOR
Name MENDENHALL, DUDLEY WAYNE
Address 1360 REYNOLDS AVE
 SUITE 101
City-State-Zip: IRVINE CA 92614

Title DIRECTOR
Name MACIARIELLO, PATRICK ANTHONY
Address 2010 MAIN STREET
 SUITE 1220
City-State-Zip: IRVINE CA 92614

Title DIRECTOR
Name MCLAUGHLIN, ELIZABETH MARY
Address 1360 REYNOLDS AVE, STE 101
City-State-Zip: IRVINE CA 92614

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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: JOHN FAIRBANK WICKS**SECRETARY****04/16/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SABO, ELIAS JOSEPH
Address 2010 MAIN STREET, STE 1220
City-State-Zip: IRVINE CA 92614

Title DIRECTOR
Name BROWN, TROYLIND RAY
Address 1360 REYNOLDS AVE, STE 101
City-State-Zip: IRVINE CA 92614