## **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005766

Entity Name: LORAM TECHNOLOGIES, INC.

**Current Principal Place of Business:** 

111 W COOPERATIVE WAY, SUITE 400 GEORGETOWN. TX 786268201

## **Current Mailing Address:**

111 W COOPERATIVE WAY, SUITE400 GEORGETOWN. TX 786268201 US

FEI Number: 74-2662968 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN STREET, SUITE 4 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

Officer/Director Detail:

Title CEO Title CFO

Name HOMAN, P. J. Name WILLEMS, B. A.

Address 3900 ARROWHEAD DRIVE, P.O. BOX Address 3900 ARROWHEAD DRIVE, P.O. BOX

ATTN: TAX DEPARTMENT ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529 City-State-Zip: HAMEL MN 55340-9529

Title PRESIDENT Title SECRETARY

Name GRISSOM, G. T. Name WILKERSON, K. E.

Address 111 W COOPERATIVE WAY, SUITE Address 3900 ARROWHEAD DRIVE, P.O. BOX

City-State-Zip: GEORGETOWN TX 786268201 ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP, HUMAN RESOURCES

400

Name BOBB, S. C. Title VP, MARKETING/SALES

Name BACHMAN, N. C.

Address 3900 ARROWHEAD DRIVE, P.O. BOX

188 Address 111 COOPERATIVE WAY ATTN: TAX DEPARTMENT SUITE 400

City-State-Zip: HAMEL MN 55340-9529 City-State-Zip: GEORGETOWN TX 78626

Title VP, SAFETY/OPERATIONS Title VP

Name STONE, J. T. Name AUGESON, J. L.

Address 111 W COOPERATIVE WAY, SUITE Address 111 W COOPERATIVE WAY, SUITE

City-State-Zip: GEORGETOWN TX 786268201 City-State-Zip: GEORGETOWN TX 786268201

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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: J. L. AUGESON VP 04/29/2021

FILED Apr 29, 2021

Secretary of State

6379696289CC

Date

## Officer/Director Detail Continued:

Title DIRECTOR
Name HOMAN, P. J.

Address 3900 ARROWHEAD DRIVE, P.O. BOX188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529

Title VP

Name DYAVANAPALLI, V.

Address 111 W COOPERATIVE WAY, SUITE 400

City-State-Zip: GEORGETOWN TX 786268201

Title DIRECTOR
Name WILLEMS, B. A.

Address 3900 ARROWHEAD DRIVE, P.O. BOX

188

ATTN: TAX DEPARTMENT

City-State-Zip: HAMEL MN 55340-9529