2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2022
Secretary of State
0283681304CC

DOCUMENT# F13000004200

Entity Name: DAVOL INC.

Current Principal Place of Business:

100 CROSSINGS BOULEVARD
WARWICK, RI 02886

Current Mailing Address:

100 CROSSINGS BOULEVARD
WARWICK, RI 02886 US

FEI Number: 05-0317655

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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	PRESIDENT
Name	KELLY, KEVIN D.
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	VP
Name	SPOEREL, THOMAS
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	VICE PRESIDENT & SECRETARY
Name	DEFAZIO, GARY
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	DIRECTOR
Name	LASALA, JOSEPH
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	VICE PRESIDENT & TREASURER
Name	RODETIS, GREG
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	VP
Name	RITTMAN, SCOTT J.
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	VP
Name	SEGRETO, ANTOINETTE
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

Title	DIRECTOR
Name	DEFAZIO, GARY
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886

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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: THOMAS SPOEREL VICE PRESIDENT 03/28/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	RAPPAPORT, ADAM
Address	100 CROSSINGS BOULEVARD
City-State-Zip:	WARWICK RI 02886