

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000004547

Entity Name: BUNZL DISTRIBUTION LEASING, INC.**Current Principal Place of Business:**ONCE CITYPLACE DRIVE STE 200
ST LOUIS, MO 63141**Current Mailing Address:**701 EMERSON ROAD
SUITE 500
ST LOUIS, MO 63141 US**FEI Number:** 41-1315072**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, DIRECTOR
Name	MCCOLL, JAMES ANTHONY
Address	18042 PINE CANYON COURT
City-State-Zip:	WILDWOOD MO 63005

Title	TREASURER
Name	VU, ANH PHUONG
Address	ONE CITYPLACE DRIVE STE 200
City-State-Zip:	ST LOUIS MO 63141

Title	SECRETARY, DIRECTOR
Name	LETT, DANIEL J
Address	ONE CITYPLACE DRIVE STE 200
City-State-Zip:	ST LOUIS MO 63141

Title	ASST TREASURER, DIRECTOR
Name	JENNEWEIN, JANE P
Address	ONCE CITYPLACE DRIVE STE 200
City-State-Zip:	ST LOUIS MO 63141

Title	ASST TREASURER
Name	HEALY, JEFFREY
Address	ONCE CITYPLACE DRIVE STE 200
City-State-Zip:	ST LOUIS MO 63141

Title	DIRECTOR
Name	MCCOOL, JAMES A.
Address	ONCE CITYPLACE DRIVE STE 200
City-State-Zip:	ST LOUIS MO 63141

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: DANIEL J. LETT**SECRETARY****04/22/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date