

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001401

Entity Name: DRISCOLL STRAWBERRY ASSOCIATES, INC.

FILED
Apr 14, 2015
Secretary of State
CC8559782574

Current Principal Place of Business:

345 WESTRIDGE DRIVE
WATSONVILLE, CA 95076

Current Mailing Address:

ATTN: TAX DEPARTMENT
P.O. BOX 50045
WATSONVILLE, CA 95077 US

FEI Number: 94-1237296

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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 CFO
Name HALL, JOHN F
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title CEO, CHAIRMAN
Name REITER, J MILES
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title SECRETARY, DIRECTOR
Name BOYLES, CHARLES S
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title PRESIDENT
Name MURPHY, KEVIN E
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title VC, DIRECTOR
Name REITER, GARLAND S
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name ATKINS, JOHN C
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name DEFEQ, NEIL P
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name DRISCOLL, THOMAS P
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

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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 HALL

**VP & CORPORATE
CONTROLLER**

04/14/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MERCADO, MANUEL
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name PRETOVICH, DUSHAN
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name MILLER, CLINTON F
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077

Title DIRECTOR
Name WHITE, NICK
Address PO BOX 50045
City-State-Zip: WATSONVILLE CA 95077