

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002620

FILED
Jan 15, 2015
Secretary of State
CC5251666733

Entity Name: IMATION ENTERPRISES CORP.

Current Principal Place of Business:

1 IMATION WAY
OAKDALE, MN 55128

Current Mailing Address:

1 IMATION WAY
OAKDALE, MN 55128

FEI Number: 41-1838502

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 DIRE
Name LUCAS, MARK E
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title SECR
Name BREEDLOVE, JOHN P
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title DIRECTOR
Name ROBINSON, SCOTT
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title CFO
Name ROBINSON, SCOTT
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title TREA
Name ZHENG, DANNY
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title PRES
Name LUCAS, MARK
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title ASST. SECRETARY
Name TENENBAUM, JENNIFER
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

Title DIRECTOR
Name BREEDLOVE, JOHN
Address 1 IMATION WAY
City-State-Zip: OAKDALE MN 55128

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: JENNIFER TENENBAUM

ASSISTANT SECRETARY 01/15/2015

Electronic Signature of Signing Officer/Director Detail

Date