2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004638

Entity Name: TUPPERWARE SERVICES, INC.

Current Principal Place of Business:

14901 SOUTH ORANGE BLOSSOM TRAIL

ORLANDO, FL 32837

Current Mailing Address:

14901 SOUTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32837 US

FEI Number: 59-3389571 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

FILED Apr 28, 2020

Secretary of State

4889342254CC

Officer/Director Detail :

Title **PRESIDENT** Title DIRECTOR, SECRETARY, VP

GOINGS, E.V. Name Name ROEHLK, THOMAS M.

14901 SOUTH ORANGE BLOSSOM 14901 SOUTH ORANGE BLOSSOM Address Address

> **TRAIL TRAIL**

City-State-Zip: ORLANDO FL 32837 City-State-Zip: ORLANDO FL 32837

Title DIRECTOR, VP Title TREASURER, VP Name HAJEK, JOSEF Name CROWE, KEITH S.

Address 14901 SOUTH ORANGE BLOSSOM Address 14901 SOUTH ORANGE BLOSSOM

TRAIL TRAIL

City-State-Zip: City-State-Zip: ORLANDO FL 32837 ORLANDO FL 32837

Title ASST. SECRETARY, VP Title CHIEF FINANCIAL OFFICER, EXECUTIVE VICE PRESIDENT Name SHEEHAN, KAREN M.

Name POTESHMAN, MICHAEL S.

14901 SOUTH ORANGE BLOSSOM Address Address 14901 SOUTH ORANGE BLOSSOM **TRAIL**

TRAIL ORLANDO FL 32837

City-State-Zip: City-State-Zip: ORLANDO FL 32837

Title VΡ

VΡ Title GARCIA, LILLIAN D. Name

Name OTERO, MADELINE Address 14901 SOUTH ORANGE BLOSSOM 2121 MIDWAY ROAD Address TRAIL

ORLANDO FL 32837

City-State-Zip: CARROLLTON TX 75006 City-State-Zip:

Continues on page 2

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.

04/28/2020 SIGNATURE: THOMAS M. ROEHLK SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, CONTROLLER

Name POUCHER, NICHOLAS K.

Address 14901 SOUTH ORANGE BLOSSOM TRAIL

City-State-Zip: ORLANDO FL 32837

Title ASST. SECRETARY
Name CHIONO, SUSAN C.

Address 14901 SOUTH ORANGE BLOSSOM TRAIL

City-State-Zip: ORLANDO FL 32837

Title ASST. SECRETARY
Name MCFALL, SANDRA

Address 14901 SOUTH ORANGE BLOSSOM

TRAIL

City-State-Zip: ORLANDO FL 32837