## **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000002091

Entity Name: NORTON LILLY INTERNATIONAL, INC.

**Current Principal Place of Business:** 

ONE ST LOUIS CENTRE

STE 5000

MOBILE, AL 36602

**Current Mailing Address:** 

ONE ST LOUIS CENTRE

STE 5000

MOBILE, AL 36602

FEI Number: 63-1222618 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 26, 2021

**Secretary of State** 

8046043156CC

Officer/Director Detail:

Title CHAIRMAN Title SECRETARY

Name THURBER, H.W. III Name ALLEN, RACHEL

Address ONE SAINT LOUIS CENTER STE 5000 Address ONE SAINT LOUIS CENTER STE 5000

City-State-Zip: MOBILE AL 36602 City-State-Zip: MOBILE AL 36602

Title DIRECTOR Title CFO

Name BARTHOLD, ALEJANDRO Name GARCIA, PATRICIO

Address ONE ST LOUIS CENTRE Address ONE ST LOUIS CENTRE

STE 5000 STE 5000

City-State-Zip: MOBILE AL 36602 City-State-Zip: MOBILE AL 36602

Title DIRECTOR Title PRESIDENT, CEO

Name VON APPEN, RICHARD Name EBENSPERGER, ANDREAS

Address ONE ST LOUIS CENTRE Address ONE ST LOUIS CENTRE

STE 5000 STE 5000

City-State-Zip: MOBILE AL 36602 City-State-Zip: MOBILE AL 36602

Title DIRECTOR

Name BUHL, FLEMMING

Address ONE ST LOUIS CENTRE

STE 5000

City-State-Zip: MOBILE AL 36602

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: RACHEL ALLEN SECRETARY 04/26/2021

Electronic Signature of Signing Officer/Director Detail

Date