

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000002235

**Entity Name:** SICK, INC.

**Current Principal Place of Business:**

6900 W. 110TH STREET  
BLOOMINGTON, MN 55438

**Current Mailing Address:**

6900 W. 110TH STREET  
BLOOMINGTON, MN 55438

**FEI Number:** 41-0970193

**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 OFF  
Name PEET, ANTHONY  
Address 6900 W. 110TH STREET  
City-State-Zip: BLOOMINGTON MN 55438

Title CFO  
Name COOLEY, WILLIAM  
Address 6900 W. 110TH STREET  
City-State-Zip: BLOOMINGTON MN 55438

Title OFF  
Name GRIEMEL, MARTIN  
Address 6900 W 110TH STREET  
City-State-Zip: BLOOMINGTON MN 55438

*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:** WILLIAM COOLEY

CFO

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date