

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P33613

**Entity Name:** KOHLER CO.

**Current Principal Place of Business:**

TAX DEPARTMENT  
KOHLER, WI 53044

**Current Mailing Address:**

TAX DEPARTMENT  
KOHLER, WI 53044

**FEI Number:** 39-0402810

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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 CD  
Name KOHLER, H. V., JR.  
Address 441 GREEN TREE RD  
City-State-Zip: KOHLER WI 53044

Title VPFO  
Name ADLER, THOMAS G  
Address 444 HIGHLAND DRIVE  
City-State-Zip: KOHLER WI 53044

Title VPT  
Name SURALIK, JOHN M  
Address 832 BRIARWOOD COURT  
City-State-Zip: KOHLER WI 53044

Title VP  
Name ROBINSON, JAMES M IV  
Address 9540 NORTH RANGE LINE ROAD  
City-State-Zip: RIVER HILLS WI 53217

*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:** THOMAS G. ADLER

VPFO

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date