

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 841281

**Entity Name:** LELY NORTH AMERICA, INC.**Current Principal Place of Business:**775 250TH AVE  
PELLA, IA 50219**Current Mailing Address:**PO BOX 437  
PELLA, IA 50219 US**FEI Number:** 51-0098254**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** PRESIDENT  
**Name** HUYSER, CHAD  
**Address** 775 250TH AVE  
**City-State-Zip:** PELLA IA 50219**Title** TREASURER, DIRECTOR,  
SECRETARY  
**Name** LANG, CHRIS  
**Address** 775 250TH AVE  
**City-State-Zip:** PELLA IA 50219**Title** DIRECTOR  
**Name** EIKELNBOOM, RONALD PAUL  
**Address** 775 250TH AVE  
**City-State-Zip:** PELLA IA 50219**Title** DIRECTOR  
**Name** SCHOLMAN, GIJSBERTUS JOHANNES  
**Address** 775 250TH AVE  
**City-State-Zip:** PELLA IA 50219**Title** DIRECTOR  
**Name** BOELEN, MARTINUS JOHANNES  
MARIA  
**Address** 775 250TH AVE  
**City-State-Zip:** PELLA IA 50219

*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:** CHRIS LANG**SECRETARY****04/27/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date