

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 848380

**Entity Name:** THE IAMS COMPANY**Current Principal Place of Business:**THE IAMS COMPANY  
ONE PROCTER & GAMBLE PLAZA  
CINCINNATI, OH 45202**Current Mailing Address:**THE IAMS COMPANY/ATTN: TAX DIV  
PO BOX 599  
CINCINNATI, OH 45201**FEI Number:** 31-0581456**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            PRESIDENT  
Name            PANAYOTOPOULOS, DIMITRI  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202Title            VPF  
Name            MOELLER, JON R  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202Title            VP/T  
Name            LIST, TERI L  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202Title            VP/C  
Name            SHEPPARD, VALARIE L  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202Title            S  
Name            WHALEY, SUSAN S  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202Title            AS  
Name            KEMEN, TOM E  
Address        ONE PROCTER & GAMBLE PLAZA  
City-State-Zip: CINCINNATI OH 45202

*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:** TOM E. KEMEN

ASST SEC'Y

04/18/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date