

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000138

Entity Name: FARMER BROS. CO.**Current Principal Place of Business:**1912 FARMER BROTHERS DR
NORTHLAKE, TX 76262**Current Mailing Address:**1912 FARMER BROTHERS DR
NORTHLAKE, TX 76262 US**FEI Number:** 95-0725980**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED CORPORATE SERVICES, INC.
9200 S DADELAND BLVD STE 508
MIAMI, FL 33156 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 S
Name BROWN , JENNIFER
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name CLARK, RANDY E
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name MOTTERN, CHRISTOPHER P
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name BOERSMA , ALLISON
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title D, CEO, PRESIDENT
Name MASERANG II, D. DEVERL
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name MARCY, CHARLES F
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title TREASURER
Name LYON, SCOTT R.
Address 1912 FARMER BROTHERS DRIVE
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name RITTERBUSH, DAVID
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

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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: SCOTT R. LYON**CFO****01/17/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ASSADI, HAMIDEH
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262

Title DIRECTOR
Name LORETZ-CONGDON, STACY
Address 1912 FARMER BROTHERS DR
City-State-Zip: NORTHLAKE TX 76262