

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28634

Entity Name: COMPASS MINERALS AMERICA INC.

FILED
Apr 19, 2017
Secretary of State
CC3690696820

Current Principal Place of Business:

9900 WEST 109TH STREET
SUITE 100
OVERLAND PARK, KS 66210

Current Mailing Address:

9900 WEST 109TH STREET
SUITE 100
OVERLAND PARK, KS 66210

FEI Number: 48-1047632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
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 DIRECTOR
Name TOMAN, DIANA C
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

Title PRESIDENT
Name MALECHA, FRANCIS J
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

Title VP, CORPORATE SERVICES
Name BERGER, STEVEN
Address 9900 W 109TH ST STE 100
City-State-Zip: OVERLAND PARK KS 66210-1841

Title VP, ASST. SECRETARY
Name GOSE, GARY R
Address 9900 W 109TH ST STE 100
City-State-Zip: OVERLAND PARK KS 66210-1841

Title SR. VP, SALT
Name SEPICH, ANTHONY
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

Title SR. VP, OPERATIONS
Name LEUNIG, JACK
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

Title SR. VP, PLANT NUTRITION
Name GRIFFITH, S BRADLEY
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

Title TREASURER
Name STANDEN, JAMES
Address 9900 WEST 109TH STREET
SUITE 100
City-State-Zip: OVERLAND PARK KS 66210

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: GARY R GOSE

**VP, TAX, ASST
SECRETARY**

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date