

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P32369

**Entity Name:** DAMCO USA INC.

**Current Principal Place of Business:**

180 PARK AVENUE  
FLORHAM PARK, NJ 07932

**Current Mailing Address:**

P.O. BOX 948  
TAX DEPARTMENT  
FLORHAM PARK, NJ 07932-0948 US

**FEI Number:** 22-2904364

**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, CHAIRMAN, DIRECTOR  
Name            THYGESSEN, HENRIETTE HALLBERG  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

Title            VP, TREASURER, SECRETARY,  
                    DIRECTOR  
Name            ANDERSEN, JAN K  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

Title            VP  
Name            MICHAELS, MARK  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

Title            VP  
Name            LAWRENCE, JOYCE P  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

Title            VP  
Name            LAUFENBERG, MONICA  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

Title            VP  
Name            PERCIVAL, JAMES B  
Address        180 PARK AVENUE  
City-State-Zip: FLORHAM PARK NJ 07932

*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:** JAN K ANDERSEN

**SECRETARY**

**04/10/2015**

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

\_\_\_\_\_  
Date