

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832235

Entity Name: CDM SMITH INC.

Current Principal Place of Business:

75 STATE STREET
#701
BOSTON, MA 02109

FILED
Mar 07, 2018
Secretary of State
CC3225203983

Current Mailing Address:

75 STATE STREET
#701
BOSTON, MA 02109 US

FEI Number: 04-2473650

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 CHB
Name WALL, TIMOTHY B
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title SECRETARY
Name MARCACCIO, MARIO J
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title P
Name BOUCHARD, ANTHONY
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title T
Name DESMARIS, THIERRY
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title D
Name STEVENSON, HOWARD H
Address 31 FAYERWEATHER STREET
City-State-Zip: NESHANIC STATION NJ 08853

Title DIRECTOR
Name O'BRIEN, WILLIAM K
Address 260 BEACON ST.
#6
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name WALTERS, GAE A
Address 2007 ALAQUA LAKES BLVD
City-State-Zip: LONGWOOD FL 32779

Title ASSISTANT SECRETARY
Name MAKOFSKY, JASON
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

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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: LISA STODDART

EXECUTIVE ASSISTANT

03/07/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TUNNICLIFFE, PETER W
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name DOWN, JAMES W
Address 20 CABOT ST.
City-State-Zip: WATERTOWN MA 01890

Title ASST. TREASURER
Name CAMPBELL, CHRISTOPHER
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109