

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004308

Entity Name: CCVSC, INC.**Current Principal Place of Business:**400 RIVER'S EDGE DRIVE
MEDFORD, MA 02155**Current Mailing Address:**400 RIVER'S EDGE DRIVE
MEDFORD, MA 02155 US**FEI Number:** 20-4889971**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
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 SECRETARY, CHIEF LEGAL OFFICER,
DIRECTOR
Name NECHELES, PETER C
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title ASST. TREASURER
Name KASPRZAK, GREGORY
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title VP
Name WOLK, HOWARD L.
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title CFO, DIRECTOR
Name GERRAUGHTY, WILLIAM B. JR.
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title TREASURER, VP
Name LUPACCHINO, MARA F.
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title CEO, PRESIDENT, DIRECTOR
Name FERRICK, DAVID P.
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

Title VP
Name WOLK, JEFFREY C.
Address 400 RIVER'S EDGE DRIVE
City-State-Zip: MEDFORD MA 02155

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: GREGORY KASPRZAK**ASSISTANT TREASURER** 04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date