

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000002171

**Entity Name:** PALLADIAN PARTNERS, INC.

**Current Principal Place of Business:**

1 INVENTA PLACE  
WEST TOWER, SUITE 800  
SILVER SPRING, MD 20910

**Current Mailing Address:**

2500 WILSON BLVD  
SUITE 400  
ARLINGTON, VA 22201 US

**FEI Number:** 52-1974660

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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  
Name LAWYER, TRACY M  
Address 3520 GREEN CT SUITE 300  
City-State-Zip: ANN ARBOR MI 48105

Title DIRECTOR  
Name LITTERAL, MALESA  
Address 3520 GREEN CT SUIT 300  
City-State-Zip: ANN ARBOR MI 48105

Title CEO, DIRECTOR  
Name MONSON, MICHAEL  
Address 2500 WILSON BLVD  
SUITE 400  
City-State-Zip: ARLINGTON VA 22201

Title VP  
Name TURNER, ERIN  
Address 1 INVENTA PLACE  
WEST TOWER, SUITE 800  
City-State-Zip: SILVER SPRING MD 20910

Title PRESIDENT  
Name YOUNG, JASON  
Address 1 INVENTA PLACE  
WEST TOWER, SUITE 800  
City-State-Zip: SILVER SPRING MD 20910

Title TREASURER, DIRECTOR  
Name STURM, DENISE  
Address 2500 WILSON BLVD, SUITE 400  
City-State-Zip: ARLINGTON VA 22201

Title DIRECTOR  
Name SANKEY, LAURA  
Address 2500 WILSON BLVD, SUITE 400  
City-State-Zip: ARLINGTON VA 22201

*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:** TRACY LAWYER

**SECRETARY**

**04/03/2024**

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

\_\_\_\_\_  
Date