

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G35222

**FILED**  
**Jan 23, 2023**  
**Secretary of State**  
**3339975334CC**

**Entity Name:** HERITAGE GLOBAL INC.

**Current Principal Place of Business:**

12625 HIGH BLUFF DRIVE STE 305  
SAN DIEGO, CA 92130

**Current Mailing Address:**

12625 HIGH BLUFF DRIVE STE 305  
SAN DIEGO, CA 92130 US

**FEI Number:** 59-2291344

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS INC  
155 OFFICE PLAZA DR STE A  
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 DIRECTOR  
Name SHIMER, SAMUEL L  
Address 175 1ST ST S  
#2701  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name CHO, SHIRLEY B  
Address PACHULSKI STANG ZIEHL & JONES  
10100 SANTA MONICA BLVD. 13TH  
FLOOR  
City-State-Zip: LOS ANGELES CA 90067-4003

Title CEO, DIRECTOR  
Name DOVE, ROSS  
Address 12625 HIGH BLUFF DRIVE STE 305  
City-State-Zip: SAN DIEGO CA 92130

Title EVP, GENERAL COUNSEL,  
SECRETARY  
Name SKLAR, JAMES  
Address 12625 HIGH BLUFF DRIVE  
SUITE 305  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name HEXNER, MICHAEL  
Address 200 BRANNAN STREET  
#332  
City-State-Zip: SAN FRANCISCO CA 94107

Title VICE PRESIDENT OF FINANCE  
Name COBB, BRIAN  
Address 12625 HIGH BLUFF DRIVE STE 305  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name SHARPE, KELLY  
Address 5094 NORTHLAWN DRIVE  
City-State-Zip: SAN JOSE CA 95130

Title DIRECTOR, PRESIDENT OF  
FINANCIAL ASSETS DIVISION  
Name LUDWIG, DAVID  
Address 10 SUNSET HILLS PROFESSIONAL  
CENTRE  
City-State-Zip: EDWARDSVILLE IL 62025

**Continues on page 2**

*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:** JAMES SKLAR

**EVP, GENERAL COUNSEL 01/23/2023  
AND SECRETARY**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           SINSLEY, BARBARA  
Address        3685 PEACHTREE RD NE  
                #10  
City-State-Zip: ATLANTA GA 30319