## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M13302

Entity Name: WIPRO GALLAGHER SOLUTIONS, INC.

**Current Principal Place of Business:** 

18001 OLD CUTLER ROAD

SUITE 651

PALMETTO BAY, FL 33157

**Current Mailing Address:** 

18001 OLD CUTLER ROAD

**SUITE 651** 

PALMETTO BAY, FL 33157 US

FEI Number: 59-2512953 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

FILED Apr 19, 2017

**Secretary of State** 

CC2868879363

Officer/Director Detail:

Title VP Title PRESIDENT

Name DURRER, WILLIAM BRADLEY Name LEFEBVRE, PETE

Address 810 CRESCENT CENTRE DRIVE Address 810 CRESENT CENTRE DRIVE

SUITE 400 SUITE 400

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

Title DIRECTOR Title SECRETARY

Name LODHA, MUKESH Name MACKLER, MITCHELL

Address 2 TOWER CENTER BOULEVARD Address 2 TOWER CENTER BOULEVARD

SUITE 2200 SUITE 2200

City-State-Zip: EAST BRUNSWICK NJ 08816 City-State-Zip: EAST BRUNSWICK NJ 08816

Title DIRECTOR Title TREASURER, CFO

Name CHAWLA, ASHISH Name JAIN, ABHISHEK KUMAR

Address 2 TOWER CENTER BOULEVARD Address 2 TOWER CENTER BOULEVARD

SUITE 2200 SUITE 2200

City-State-Zip: EAST BRUNSWICK NJ 08816 City-State-Zip: EAST BRUNSWICK NJ 08816

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: MITCHELL MACKLER

**SECRETARY** 

04/19/2017 Date