

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10935

Entity Name: SODEXO MANAGEMENT, INC.

Current Principal Place of Business:

9801 WASHINGTONIAN BLVD
GAITHERSBURG, MD 20878

Current Mailing Address:

PO BOX 352
BUFFALO, NY 14240 US

FEI Number: 16-0812661

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US

FILED
Apr 20, 2022
Secretary of State
5982248802CC

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 PD
Name MISTRY, SAROSH
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title V
Name WOOLBRIGHT JACKSON, JENNIFER
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title S
Name MCGLOCKTON, JOAN
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title AS
Name BROOKS, SCOTT
Address 400 AIRBORNE PARKWAY
City-State-Zip: CHEEKTOWAGA NY 14225

Title T, VP
Name BLASS, MARC
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title DIRECTOR
Name PICCIRILLO, ANGELO
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title VP
Name PAYNE, STEPHANIE
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title ASST. SECRETARY
Name STEELE, GREG
Address 400 AIRBORNE PARKWAY
City-State-Zip: CHEEKTOWAGA NY 14225

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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: GREG STEELE

ASSISTANT SECRETARY 04/20/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. TREASURER
Name BROCK, PAUL
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title VP, DIRECTOR
Name DE TRAMASURE, SEBASTIEN
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878

Title VP, ASST. SECRETARY
Name MORSE, THOMAS
Address 9801 WASHINGTONIAN BLVD
City-State-Zip: GAITHERSBURG MD 20878