

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000001581

Entity Name: UPSTREAM USA, INC.

Current Principal Place of Business:

2 OLIVER STREET
SUITE 402
BOSTON, MA 02109

FILED
Apr 22, 2024
Secretary of State
9312479497CC

Current Mailing Address:

2 OLIVER STREET
SUITE 402
BOSTON, MA 02109 US

FEI Number: 35-2581424

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORPORATING SERVICES, LTD.
1540 GLENWAY DR.
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: ASHLEY WRIGHT - ASSISTANT SECRETARY

04/22/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR, DIRECTOR
Name BEKENSTEIN, ANITA
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title VICE-CHAIR, DIRECTOR
Name BROWN, SARAH
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name STEVENSON, HOWARD H
Address 2 OLIVER ST
SUITE 402
City-State-Zip: BOSTON MA 02109

Title CEO, DIRECTOR
Name EDWARDS, MARK
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name PERRY, MARK
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name GANNON, PAUL
Address 2 OLIVER ST
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name JAMES, THEA
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title TREASURER
Name GREENFIELD, JESSICA
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JESSICA GREENFIELD

TREASURER, CFO

04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY, DIRECTOR
Name HIGGINS , KEITH
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name WHITE, KRISHNA
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name STARRS, ANN
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title ASSISTANT SECRETARY
Name HO, JOHN
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name BAKER, LAUREN S
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name RANSOM, SCOTT
Address 2 OLIVER STREET
SUITE 402
City-State-Zip: BOSTON MA 02109