

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 800132

Entity Name: OTIS ELEVATOR COMPANY

Current Principal Place of Business:

ONE CARRIER PLACE
FARMINGTON, CT 06032

FILED
Apr 07, 2018
Secretary of State
CC2553543083

Current Mailing Address:

ONE CARRIER PLACE
FARMINGTON, CT 06032 US

FEI Number: 13-5583389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 GEORGE, MARK R.
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title DIRECTOR
Name LAFRENIERE, NORA
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title DIRECTOR
Name MARKS, JUDITH F.
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title PRESIDENT
Name MARKS, JUDITH F.
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title SECRETARY
Name LAFRENIERE, NORA
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title TREASURER
Name WITZKY, CHRISTOPHER
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title ASSISTANT SECRETARY
Name POLLARD, BRYAN K.
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

Title ASSISTANT SECRETARY
Name JONES, DAVID M.
Address ONE CARRIER PLACE
City-State-Zip: FARMINGTON CT 06032

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: DAVID M. JONES

ASSISTANT SECRETARY 04/07/2018

Electronic Signature of Signing Officer/Director Detail

Date