

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805321

Entity Name: PITNEY BOWES INC.

Current Principal Place of Business:

27 WATERVIEW DRIVE
SHELTON, CT 06484

Current Mailing Address:

27 WATERVIEW DRIVE MSC 27-3C
SHELTON, CT 06484 US

FEI Number: 06-0495050

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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 PRESIDENT, DIRECTOR
Name LAUTENBACH, MARC B
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title VP, TREASURER
Name SALCE, DEBBIE
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title SECRETARY
Name GOLDSTEIN, DANIEL
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title VP
Name MITTLEMAN, ROBERTA
Address 27 WATERVIEW DRIVE MSC 27-3C
City-State-Zip: SHELTON CT 06484

Title VP, CFO
Name CHADWICK, ANA
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title VP
Name CATAPANO, JOSEPH
Address 27 WATERVIEW DRIVE
City-State-Zip: SHELTON CT 06484

Title VP
Name BORRELLE, WILLIAM A
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title VP
Name DIES, JASON
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

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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: ROBERTA MITTLEMAN

VICE PRESIDENT

03/30/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name FAIRWEATHER, JAMES
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name DUTKOWSKY, ROBERT M
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name HUTCHESON, S DOUGLAS
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name SANFORD, LINDA S
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name STAMPS, SHEILA A
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name BUSQUET, ANNE M
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name FUCHS, ANNE SUTHERLAND
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name ROTH, MICHAEL I
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name SHEDLARZ, DAVID L
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926

Title DIRECTOR
Name STEELE GUILFOILE, MARY J
Address 3001 SUMMER STREET
City-State-Zip: STAMFORD CT 06926