

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 812869

**Entity Name:** XEROX CORPORATION**Current Principal Place of Business:**201 MERRITT 7  
NORWALK, CT 06851**Current Mailing Address:**201 MERRITT 7  
NORWALK, CT 06851 US**FEI Number:** 16-0468020**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES STREET  
SUITE 105  
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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BANDROWCZAK, STEVEN J.  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title            TREASURER, VP  
Name            KIRK, STUART W  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title            DIRECTOR  
Name            ECHEVARRIA, JOSEPH  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title            DIRECTOR  
Name            BRANDROWCZAK, STEVEN J  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title            DIRECTOR  
Name            LYNN, JESSE  
Address        767 FIFTH AVENUE  
                 SUITE 4700  
City-State-Zip: NEW YORK NY 10153

Title            DIRECTOR  
Name            SCOTT LETIER, ANDREW  
Address        5956 SHERRY LANE  
                 SUITE 800  
City-State-Zip: DALLAS TX 75225

Title            DIRECTOR  
Name            BRUNO, JOHN  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title            DIRECTOR  
Name            MAYNARD-ELLIOTT, NICHELLE  
Address        201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

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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:** FLOR M. COLON**SECRETARY****05/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name DANIEL MILLER, STEVEN  
Address 201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title DIRECTOR  
Name PALAU-HERNANDEZ, MARGARITA  
Address 201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title SECRETARY  
Name COLON, FLOR M  
Address 201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title DIRECTOR  
Name GIORDANO, PHILIP  
Address 201 MERRITT 7  
City-State-Zip: NORWALK CT 06851

Title DIRECTOR  
Name NELSON, JAMES  
Address 201 MERRITT 7  
City-State-Zip: NORWALK CT 06851