

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832235

Entity Name: CDM SMITH INC.

Current Principal Place of Business:

75 STATE STREET
#701
BOSTON, MA 02109

Current Mailing Address:

75 STATE STREET
#701
BOSTON, MA 02109 US

FEI Number: 04-2473650

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 CEO, CHAIRMAN OF THE BOARD,
DIRECTOR
Name WALL, TIMOTHY B
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title PRESIDENT, COO, DIRECTOR
Name BOUCHARD, ANTHONY
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title DIRECTOR, CFO, EXECUTIVE VICE
PRESIDENT
Name DESMARIS, THIERRY
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title ASSISTANT SECRETARY, SENIOR
LEGAL COUNSEL
Name MAKOFSKY, JASON
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title TREASURER
Name CAMPBELL, CHRISTOPHER
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title SECRETARY, ASSISTANT GENERAL
COUNSEL
Name MILLIGAN, PAUL T
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109

Title DIRECTOR, GENERAL COUNSEL
Name MARCACIO, MARIO
Address 75 STATE STREET
SUITE 701
City-State-Zip: BOSTON MA 02109

Title DIRECTOR
Name GAE, WALTERS
Address 2007 ALAQUA LAKES BOULEVARD
City-State-Zip: LONGWOOD FL 32779

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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: PAUL MILLIGAN

SECRETARY

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HOWARD, STEVENSON
Address 31 FAYERWEATHER STREET
City-State-Zip: CAMBRIDGE MA 02138

Title DIRECTOR
Name JENNIFER, BANNER
Address 6715 SHERWOOD DRIVE
City-State-Zip: KNOXVILLE TN 37919

Title DIRECTOR, CMO, VP
Name FORGAS, JULIA
Address 75 STATE STREET
#701
City-State-Zip: BOSTON MA 02109