## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 849923** 

Entity Name: WILLIAMS SCOTSMAN, INC.

**Current Principal Place of Business:** 

901 S. BOND STREET

SUITE 600

BALTIMORE, MD 21231

**Current Mailing Address:** 

901 S. BOND STREET

SUITE 600

BALTIMORE, MD 21231 US

FEI Number: 52-0665775 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

Electronic Signature of 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:

Name

Name

City-State-Zip:

City-State-Zip:

Date

**FILED** Mar 22, 2019

**Secretary of State** 

4776049870CC

Officer/Director Detail:

Title ASSISTANT SECRETARY Title DIRECTOR, VP

Name BISHOP, SAMANTHA Name SMITH, WARREN

Address 901 S. BOND STREET Address 901 S. BOND STREET

SUITE 600 SUITE 600

BALTIMORE MD 21231 City-State-Zip: BALTIMORE MD 21231 City-State-Zip:

Title DIRECTOR, CFO DIRECTOR, GENERAL COUNSEL, Title

> SECRETARY, VP **BOSWELL, TIMOTHY** BACON, BRADLEY L. Name

901 S. BOND STREET Address 901 S. BOND STREET

Address SUITE 600

SUITE 600 BALTIMORE MD 21231

BALTIMORE MD 21231 City-State-Zip:

Title DIRECTOR, PRESIDENT Title TREASURER, CHIEF ACCOUNTING

SOULTZ, BRADLEY L **OFFICER** 

901 S. BOND STREET SHANKS, SALLY Address Name

SUITE 600

901 S. BOND STREET Address City-State-Zip: BALTIMORE MD 21231 SUITE 600

BALTIMORE MD 21231 City-State-Zip: Title **NEVADA COMPLIANCE OFFICER** 

Name MCKIM, JACOB Title ASST. TREASURER

901 S. BOND STREET Name KEMMERY, BOB Address

SUITE 600 901 S. BOND STREET Address

BALTIMORE MD 21231 SUITE 600

> City-State-Zip: BALTIMORE MD 21231

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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.

03/22/2019 SIGNATURE: SAMANTHA BISHOP ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title

Name GOULD, DARREN C.

901 S. BOND STREET SUITE 600 Address

City-State-Zip: BALTIMORE MD 21231

VΡ Title

Name AUNS, ANDREW

Address 901 S. BOND STREET

SUITE 600

City-State-Zip: BALTIMORE MD 21231

Title VP

Name DELALANDE, ANTOINE

Address 901 S. BOND STREET

SUITE 600

City-State-Zip: BALTIMORE MD 21231