

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003024

FILED
Jan 10, 2018
Secretary of State
CC6233415786

Entity Name: THE S/L/A/M COLLABORATIVE, INC.

Current Principal Place of Business:

80 GLASTONBURY BLVD.
GLASTONBURY, CT 06033

Current Mailing Address:

80 GLASTONBURY BLVD.
GLASTONBURY, CT 06033 US

FEI Number: 06-0950562

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PULITO, ROBERT F
Address 80 GLASTONBURY BLVD
City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR
Name ANSEL, STEVEN W
Address 80 GLASTONBURY BLVD
City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR
Name CONNELL, RICHARD T
Address 80 GLASTONBURY BLVD
City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR
Name KARANIAN, WILLIAM H
Address 80 GLASTONBURY BLVD
City-State-Zip: GLASTONBURY CT 06033

Title TREASURER
Name KANTOR, DANIEL S
Address 80 GLASTONBURY BLVD
City-State-Zip: GLASTONBURY CT 06033

Title SECRETARY, DIRECTOR
Name DOHERTY, STEVEN R.
Address 80 GLASTONBURY BLVD.
City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR
Name WARD, SIDNEY P
Address 675 PONCE DE LEON AVE
 SUITE 4100
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name OLENICK, MARY JO
Address 80 GLASTONBURY BLVD.
City-State-Zip: GLASTONBURY CT 06033-4415

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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: DANIEL S. KANTOR

TREASURER

01/10/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FRINK, TERRI L
Address 80 GLASTONBURY BLVD.
City-State-Zip: GLASTONBURY CT 06033-4415

Title ASST. SECRETARY
Name JOHNSON, BRENDA
Address 80 GLASTONBURY BLVD.
City-State-Zip: GLASTONBURY CT 06033

Title ASST. TREASURER
Name CONWAY, LUCY
Address 80 GLASTONBURY BLVD.
City-State-Zip: GLASTONBURY CT 06033