2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003024

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:

REGISTERED AGENTS INC 7901 4TH STREET N, SUITE 300 ST.PETERSBURG, FL 33702 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

FILED Apr 22, 2019

Secretary of State

1484117270CC

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title DIRECTOR

Name PULITO, ROBERT F Name ANSEL, STEVEN W

Address 80 GLASTONBURY BLVD Address 80 GLASTONBURY BLVD

City-State-Zip: GLASTONBURY CT 06033 City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR Title TREASURER

Name CONNELL, RICHARD T Name KANTOR, DANIEL S

Address 80 GLASTONBURY BLVD Address 80 GLASTONBURY BLVD

City-State-Zip: GLASTONBURY CT 06033 City-State-Zip: GLASTONBURY CT 06033

Title DIRECTOR Title DIRECTOR

Name OLENICK, MARY JO Name FRINK, TERRI L

Address 80 GLASTONBURY BLVD. Address 80 GLASTONBURY BLVD.

City-State-Zip: GLASTONBURY CT 06033-4415 City-State-Zip: GLASTONBURY CT 06033-4415

Title ASST. SECRETARY Title ASST. TREASURER
Name JOHNSON, BRENDA Name CONWAY, LUCY

Address 80 GLASTONBURY BLVD. Address 80 GLASTONBURY BLVD.

City-State-Zip: GLASTONBURY CT 06033 City-State-Zip: GLASTONBURY CT 06033

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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: LUCY CONWAY ASSISTANT TREASURER 04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

Name MORHARDT, KEMP R Name COLES, GREGORY

Address 80 GLASTONBURY BLVD. Address 80 GLASTONBURY BLVD.

City-State-Zip: GLASTONBURY CT 06033 City-State-Zip: GLASTONBURY CT 06033