### **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000004728

Entity Name: BHC CUSTOMER CARE INTEGRATION CORP.

FILED
Jan 10, 2020
Secretary of State
1883209179CC

## **Current Principal Place of Business:**

90 AIR PARK DR.

**STE 200** 

ROCHESTER, NY 14624

# **Current Mailing Address:**

90 AIR PARK DR.

**STE 200** 

Address

ROCHESTER, NY 14624 US

FEI Number: 16-1573553 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 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: MARK WILLIAMS 01/10/2020

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name NORTHRUP, STEPHEN Name NORTHRUP (CHAIRMAN OF THE

90 AIR PARK DR. STE 200 BOARD), STEPHEN

Address 90 AIR PARK DR. STE 200
City-State-Zip: ROCHESTER NY 14624

City-State-Zip: ROCHESTER NY 14624

Title VICE-PRESIDENT Title SECRETARY
Name NORTHRUP, STEPHEN

Address 90 AIR PARK DR. STE 200

City-State-Zip: ROCHESTER NY 14624

Name NORTHRUP, STEPHEN

Address 90 AIR PARK DR. STE 200

City-State-Zip: ROCHESTER NY 14624

City-State-Zip: ROCHESTER NY 14624 City-State-Zip: ROCHESTER NY 14624

Title TREASURER

Name NORTHRUP, CHRISTINA
Address 90 AIR PARK DR. STE 200
City-State-Zip: ROCHESTER NY 14624

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: STEPHEN NORTHRUP

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/10/2020