

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005172

Entity Name: C & W FACILITY SERVICES INC.**Current Principal Place of Business:**140 KENDRICK STREET, BUILDING C, SUITE 201
NEEDHAM, MA 02494**Current Mailing Address:**140 KENDRICK STREET, BUILDING C, SUITE 201
NEEDHAM, MA 02494 US**FEI Number:** 77-0698582**Certificate of Status Desired:** No**Name and Address of Current 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name EUSTACE, VANESSA
Address 140 KENDRICK STREET, BUILDING C,
SUITE 201
City-State-Zip: NEEDHAM MA 02494

Title VP, TREASURER
Name LOEBACH, CHRISTINA
Address 140 KENDRICK STREET, BUILDING C,
SUITE 201
City-State-Zip: NEEDHAM MA 02494

Title VP
Name BACIGALUPO, DIANA
Address 140 KENDRICK STREET, BUILDING C,
SUITE 201
City-State-Zip: NEEDHAM MA 02494

Title DIRECTOR
Name SWINBURNE, JODI
Address 117 KENDRICK STREET, SUITE 250
City-State-Zip: NEEDHAM MA 02494

Title PRESIDENT
Name MENDS, MIA
Address 117 KENDRICK STREET, SUITE 250
City-State-Zip: NEEDHAM MA 02494

Title ASST. TREASURER
Name MOLITO, , JOSEPH
Address 140 KENDRICK STREET, BUILDING C,
SUITE 201
City-State-Zip: NEEDHAM MA 02494

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: MOLITO, JOSEPH**ASST. TREASURER****02/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date