

**2024 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F10000001900

**Entity Name:** GREENMAN-PEDERSEN, INC.

**Current Principal Place of Business:**

325 W MAIN ST  
BABYLON, NY 11702

**Current Mailing Address:**

325 W MAIN ST  
BABYLON, NY 11702 US

**FEI Number: 11-2537074**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

REGISTERED AGENT INC.  
7901 4TH ST N STE 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

**Officer/Director Detail :**

Title SECRETARY  
Name BUONCORE, MICHAEL  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title PRESIDENT  
Name KENNEALLY, PATRICK  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title TREASURER  
Name BUONCORE, MICHAEL  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title CHAIR  
Name GREENMAN, STEVEN  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title DIRECTOR  
Name NORELLA, LOUIS  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title SENIOR VICE PRESIDENT  
Name SALATTI, MICHAEL  
Address 325 W MAIN ST  
City-State-Zip: BABYLON NY 11702

Title SENIOR VICE PRESIDENT  
Name BUCKLEW, SANDRA  
Address 1010 EAST ADAMS STREET  
SUITE 106  
City-State-Zip: JACKSONVILLE FL 32202

Title ASSISTANT VICE PRESIDENT  
Name DON BUWALDA  
Address 1010 EAST ADAMS STREET  
SUITE 106  
City-State-Zip: JACKSONVILLE FL 32202

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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: MICHAEL BUONCORE**

**SECRETARY**

**03/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title EXECUTIVE VICE PRESIDENT  
Name RUPERT, ROBERT  
Address 1010 EAST ADAMS STREET  
SUITE 106  
City-State-Zip: JACKSONVILLE FL 32202

Title VP  
Name CICCARELLI, JESSICA  
Address 1112 E KENNEDY BOULEVARD  
City-State-Zip: TAMPA FL 33602

Title ASSISTANT VICE PRESIDENT  
Name THOMAS, TIMOTHY  
Address 8552 UNITED PLAZA BOULEVARD  
SUITE 702  
City-State-Zip: BATON ROUGE LA 70809

Title EXECUTIVE VICE PRESIDENT  
Name VINIK, PAUL  
Address 1040 PELICAN BAY DRIVE  
City-State-Zip: DAYTONA BEACH FL 32119

Title VP  
Name SCHMUTZ, DAN  
Address 3051 E LIVINGSTON STREET  
SUITE 300  
City-State-Zip: ORLANDO FL 32803

Title ASSISTANT VICE PRESIDENT  
Name MOBLEY, SHANNON  
Address 1010 EAST ADAMS STREET  
SUITE 106  
City-State-Zip: JACKSONVILLE FL 32202

Title ASSISTANT VICE PRESIDENT  
Name EVANS, DUSTIN  
Address 1590 VILLAGE SQUARE BOULEVARD  
City-State-Zip: TALLAHASSEE FL 32309