

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000005153

Entity Name: MOTT MACDONALD GROUP, INC.

Current Principal Place of Business:

111 WOOD AVENUE SOUTH
ISELIN, NJ 08830-4112

Current Mailing Address:

111 WOOD AVENUE SOUTH
ISELIN, NJ 08830-4112

FEI Number: 22-3789761

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 PCEO, DIRECTOR
Name DENICHILO, NICHOLAS M
Address 111 WOOD AVENUE SOUTH
City-State-Zip: ISELIN NJ 08830-4112

Title EVPS, DIRECTOR
Name WHITE, DAVID P
Address 4301 HACIENDA DRIVE
SUITE 300
City-State-Zip: PLEASANTON CA 94588

Title T, EXECUTIVE VICE PRESIDENT
Name HILLA, JEFFREY T
Address 111 WOOD AVENUE SOUTH
City-State-Zip: ISELIN NJ 08830-4112

Title SECRETARY, DIRECTOR
Name GENNARO, MICHAEL M.
Address 111 WOOD AVENUE SOUTH
City-State-Zip: ISELIN NJ 08830-4112

Title DIRECTOR
Name HOWELLS, KEITH J.
Address 10 FLEET PLACE
City-State-Zip: LONDON EC4M 7RB,

Title DIRECTOR
Name LEONARD, GUY
Address 10 FLEET PLACE
City-State-Zip: LONDON EC4M 7RB

Title DIRECTOR
Name HAIGH, MICHAEL
Address 111 WOOD AVENUE SOUTH
City-State-Zip: ISELIN NJ 08830-4112

Title DIRECTOR
Name ROUD, EDWIN
Address 10 FLEET PLACE
City-State-Zip: LONDON EC4M 7RB

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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: DAVID P. WHITE

SECRETARY

01/31/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BENINATO, ALBERT N.
Address 111 WOOD AVENUE SOUTH
City-State-Zip: ISELIN NJ 08830-4112