

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000004030

Entity Name: CROSSCOUNTRY CONSULTING HOLDINGS, INC.**Current Principal Place of Business:**1600 TYSONS BLVD.
SUITE 1100
MCLEAN, VA 22102**Current Mailing Address:**1600 TYSONS BLVD.
SUITE 1100
MCLEAN, VA 22102 US**FEI Number:** 83-4321718**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 CFO
Name SEIBEL, AMY
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR
Name SMILEY, RYAN
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title PRESIDENT
Name LINN, ERIK
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR
Name LEWIS, J. CHRISTOPHER
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title VP
Name SMILEY, RYAN
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title PRESIDENT
Name KAY, DAVID
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR
Name RAMOS, TIM
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR
Name LINN, ERIK
Address 1600 TYSONS BLVD.
SUITE 1100
City-State-Zip: MCLEAN VA 22102

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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: AMY SEIBEL

CFO

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	SECRETARY
Name	KAY, DAVID	Name	SMILEY, RYAN
Address	1600 TYSONS BLVD. SUITE 1100	Address	1600 TYSONS BLVD. SUITE 1100
City-State-Zip:	MCLEAN VA 22102	City-State-Zip:	MCLEAN VA 22102