

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001892

FILED
Apr 14, 2012
Secretary of State

Entity Name: ABM FACILITY SERVICES, INC.

Current Principal Place of Business:

165 TECHNOLOGY DRIVE, SUITE 150
IRVINE, CA 92816

New Principal Place of Business:

152 TECHNOLOGY DRIVE
IRVINE, CA 92816 US

Current Mailing Address:

165 TECHNOLOGY DRIVE, SUITE 150
IRVINE, CA 92816

New Mailing Address:

152 TECHNOLOGY DRIVE
IRVINE, CA 92816 US

FEI Number: 95-2543310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: LATHAM, MICHAEL PRES
Address: 152 TECHNOLOGY DR.
City-St-Zip: IRVINE, CA 92618 US

Title: SEC
Name: MCCONNELL, SARAH H SEC
Address: 551 FIFTH AVE, STE 300
City-St-Zip: NEW YORK, NY 10176 US

Title: TRES
Name: SCAGLIONE, DIEGO ANTHONY TRES
Address: 152 TECHNOLOGY DRIVE
City-St-Zip: IRVINE, CA 92816 US

Title: DIR
Name: LUSK, JAMES S DIR
Address: 551 FIFTH AVE, STE 300
City-St-Zip: NEW YORK, NY 10176 US

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: LAURA LOUIS

POA

04/14/2012

Electronic Signature of Signing Officer or Director

Date