2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000015052

Entity Name: THOMSON REUTERS ENTERPRISE CENTRE GMBH LLC

FILED Apr 15, 2023 Secretary of State 3479039408CC

Current Principal Place of Business:

C/O THOMSON RETUERS LANDIS + GYR-STRASSE 3 ZUG, 6300

Current Mailing Address:

C/O THOMSON RETUERS LANDIS + GYR-STRASSE 3 ZUG, 6300 CH

FEI Number: 98-0435183 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

Authorized Person(s) Detail:

Title **MANAGER** Title MANAGER

Name GRAY, ANDREW Name PECCARELLI, BRIAN Address C/O THOMSON RETUERS Address 2395 MIDWAY ROAD

LANDIS + GYR-STRASSE 3 City-State-Zip: CARROLLTON TX 75006

ZUG 6300 City-State-Zip:

Title **MANAGER** Title **MANAGER**

Name WONG, DAVID FRANKLIN LARSON, DAVID FRANCIS Name

C/O THOMSON RETUERS Address

TORONTO ON M5H2R2 City-State-Zip: LANDIS + GYR-STRASSE 3

Address

Title

City-State-Zip: ZUG 6300 Title MANAGER

ELLIOTT-STEVENS, JIMMA Title **MANAGER** Name

STERCHI, HERBERT Name Address C/O THOMSON RETUERS

> LANDIS + GYR-STRASSE 3 C/O THOMSON RETUERS

City-State-Zip: ZUG 6300 LANDIS + GYR-STRASSE 3

City-State-Zip: ZUG 6300

MANAGER Title

MANAGER Name ROTH, KIRSTY

Name HENDRIKX, KERRY Address C/O THOMSON RETUERS LANDIS + GYR-STRASSE 3

C/O THOMSON RETUERS

City-State-Zip: ZUG 6300 LANDIS + GYR-STRASSE 3

ZUG 6300 City-State-Zip:

Address

Address

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333 BAY STREET

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/15/2023 SIGNATURE: ANDREW GRAY, JIMMA ELLIOTT-STEVENS MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

MANAGER

Title

Title MANAGER Title

Name SHARMA, KRITI Name EASTWOOD, MICHAEL K

MANAGER

Address C/O THOMSON RETUERS Address 333 BAY STREET

LANDIS + GYR-STRASSE 3
City-State-Zip: TORONTO ON M5H2R2
City-State-Zip: ZUG 6300

Title MANAGER

Name PEREZ, PABLO Name HASKER, STEPHEN J

Address C/O THOMSON RETUERS

Address 333 BAY STREET

LANDIS + GYR-STRASSE 3 City-State-Zip: TORONTO ON M5H2R2

City-State-Zip: ZUG 6300