#### **2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000003004

Entity Name: VIABILITY, INC.

FILED Feb 01, 2023 Secretary of State 1718169277CC

# **Current Principal Place of Business:**

60 BROOKDALE DRIVE SPRINGFIELD, MA 01104

# **Current Mailing Address:**

60 BROOKDALE DRIVE SPRINGFIELD. MA 01104 US

FEI Number: 51-0178661 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HOLMES, COLLEEN 11200 SW 8TH STREET FLORIDA INTERNATIONAL UNIVERSITY MARC 140 MIAMI, FL 33199 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: COLLEEN HOLMES 02/01/2023

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PRESIDENT & CEO Title **CHAIR EMERITUS** Name HOLMES, COLLEEN Name MARINI, TIMOTHY Address 60 BROOKDALE DRIVE Address 60 BROOKDALE DRIVE City-State-Zip: SPRINGFIELD MA 01104 City-State-Zip: SPRINGFIELD MA 01104

Title DIRECTOR Title CHAIR

NameSOBEY, STEPHENNameFITZGERALD, FRANCISAddress60 BROOKDALE DRIVEAddress60 BROOKDALE DRIVECity-State-Zip:SPRINGFIELD MA 01104City-State-Zip:SPRINGFIELD MA 01104

Title DIRECTOR Title CLERK

NameENGLISH, MELISSANameBIENKOWSKI, THOMASAddress60 BROOKDALE DRIVEAddress60 BROOKDALE DRIVECity-State-Zip:SPRINGFIELD MA 01104City-State-Zip:SPRINGFIELD MA 01104

Title TREASURER Title VICE CHAIR

Name SMOLKOWICZ, CHARLENE Name DEAN, JONATHON STEPHEN
Address 60 BROOKDALE DRIVE Address 60 BROOKDALE DRIVE
City State 7in: SPRINGELE D. MA. 04104

City-State-Zip: SPRINGFIELD MA 01104 City-State-Zip: SPRINGFIELD MA 01104

#### Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANICE BIRON-FOUCHER

CHIEF FINANCIAL OFFICER

02/01/2023

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Title CFO

NameSPILIOTES, AMELIANameBIRON-FOUCHER, JANICEAddress60 BROOKDALE DRIVEAddress60 BROOKDALE DRIVE

City-State-Zip: SPRINGFIELD MA 01104 City-State-Zip: SPRINGFIELD MA 01104