2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2022
Secretary of State
2711698364CC

DOCUMENT# F19000000093

Entity Name: CORPORATION FOR A SKILLED WORKFORCE, INC.

Current Principal Place of Business:

1100 VICTORS WAY
SUITE 10
ANN ARBOR, MI 48108

Current Mailing Address:

1100 VICTORS WAY
SUITE 10
ANN ARBOR, MI 48108 US

FEI Number: 38-2991143

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	PRESIDENT, CEO
Name	GOOD, LARRY A
Address	1100 VICTORS WAY SUITE 10
City-State-Zip:	ANN ARBOR MI 48108

Title	TREASURER, CFO
Name	CAVANAUGH, SHERRI
Address	1100 VICTORS WAY SUITE 10
City-State-Zip:	ANN ARBOR MI 48108

Title	DIRECTOR
Name	CARNIESHA, KWASHIE
Address	1100 VICTORS WAY SUITE 10
City-State-Zip:	ANN ARBOR MI 48108

Title	DIRECTOR
Name	GREENE, TODD
Address	156 MILDRED STREET, SW
City-State-Zip:	ATLANTA GA 30314

Title	SECRETARY
Name	CHARLTON, DEBORA
Address	1100 VICTORS WAY SUITE 10
City-State-Zip:	ANN ARBOR MI 48108

Title	DIRECTOR
Name	SNYDER, NANCY
Address	12 RUSTIC ROAD
City-State-Zip:	WEST ROXBURY MA 02132

Title	DIRECTOR
Name	WEATHERFORD, NANCY
Address	408 WEST KILBUCK STREET
City-State-Zip:	TECUMSEH MI 49286

Title	DIRECTOR
Name	RODRIGUEZ, JULIO
Address	6007 N. SHERIDAN APT. 5C
City-State-Zip:	CHICAGO IL 60660

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

SIGNATURE: DEBORA CHARLTON SECRETARY 04/21/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CAWTHORNE GAINES, ALEXANDRA
Address	1333 H STREET NW, 10TH FLOOR
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	NUNN, RODERICK
Address	5600 OAKLAND AVE
City-State-Zip:	ST. LOUIS MO 63110

Title	DIRECTOR
Name	SIMON, MARTIN
Address	1100 VICTORS WAY SUITE 10
City-State-Zip:	ANN ARBOR MI 48108

Title	DIRECTOR
Name	REED, JOSEPH
Address	2333 ALUMNI PARK PLAZA SUITE 300
City-State-Zip:	LEXINGTON KY 40517

Title	DIRECTOR
Name	GALLAHER, JAMES
Address	4600 SUNSET AVE
City-State-Zip:	INDIANAPOLIS IN 46208