

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851619

Entity Name: CGI TECHNOLOGIES AND SOLUTIONS INC.**Current Principal Place of Business:**11325 RANDOM HILLS ROAD
FAIRFAX, VA 22030**Current Mailing Address:**11325 RANDOM HILLS ROAD
FAIRFAX, VA 22030 US**FEI Number:** 54-0856778**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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** EXECUTIVE VICE PRESIDENT, LEGAL
AND ECONOMIC AFFAIRS,
CORPORATE SECRETARY**Name** DUBE, BENOIT**Address** 1350 RENE-LEVESQUE BOULEVARD
WEST
25TH FLOOR**City-State-Zip:** MONTREAL H3G 1T4**Title** VP, GENERAL COUNSEL, AND
ASSISTANT CORPORATE
SECRETARY**Name** MCFADDEN, ERIC LEE**Address** 11325 RANDOM HILLS ROAD**City-State-Zip:** FAIRFAX VA 22030**Title** VICE-PRESIDENT, LEGAL AFFAIRS
AND DEPUTY CORPORATE
SECRETARY**Name** CRANDALL, DAVID**Address** 1350 RENE-LEVESQUE BOULEVARD
WEST
25TH FLOOR**City-State-Zip:** MONTREAL H3G 1T4**Title** VP, FINANCE AND CORPORATE
CONTROLLER**Name** LAVOIE, ANNY**Address** 1350 RENE-LEVESQUE BOULEVARD
WEST
25TH FLOOR**City-State-Zip:** MONTREAL H3G 1T4**Title** COO**Name** HURLEBAUS, TIMOTHY J.**Address** 11325 RANDOM HILLS ROAD**City-State-Zip:** FAIRFAX VA 22030**Title** DIRECTOR, VP, CONTROLLER
UNITED STATES, COMMERCIAL &
STATE GOVERNMENT**Name** BOUCHER, DOMINIC**Address** 11325 RANDOM HILLS ROAD**City-State-Zip:** FAIRFAX VA 22030**Title** VP, TREASURY AND TAXATION**Name** MITCHELL, JOSEPH**Address** 1350 RENE-LEVESQUE BOULEVARD
WESET
25TH FLOOR**City-State-Zip:** MONTREAL H3G 1T4**Title** EXECUTIVE VICE PRESIDENT AND
CHIEF FINANCIAL OFFICER,
DIRECTOR**Name** PERRON, STEVE**Address** 1350 RENE-LEVESQUE BOULEVARD
WEST
25TH FLOOR**City-State-Zip:** MONTREAL QC H3G 1T4**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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BENOIT DUBE

04/28/2025

Officer/Director Detail Continued :

Title PRESIDENT, DIRECTOR
Name SRINIVASAN, VIJAY
Address 3426 TORINGDON WAY
 SUITE 405
City-State-Zip: CHARLOTTE NC 28277