

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000000710

**Entity Name:** PASS & SEYMOUR, INC.

**Current Principal Place of Business:**

50 BOYD AVENUE  
SYRACUSE, NY 13221

**Current Mailing Address:**

50 BOYD AVENUE  
SYRACUSE, NY 13221 US

**FEI Number:** 15-0412360

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           TREASURER  
Name           LAPERRIERE, JAMES  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           DIRECTOR  
Name           LEMERY, FRANCK  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           CHAIRMAN OF THE BOARD  
Name           SELLDORFF, JOHN  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           VP  
Name           SCHNEIDER, STEVE  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           DIRECTOR  
Name           BEUGIN, DAVID  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           PRESIDENT  
Name           RAMANATHAN, RAVI  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

Title           SECRETARY  
Name           RUOTOLO, GALINA  
Address        50 BOYD AVENUE  
City-State-Zip: SYRACUSE NY 13221

*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:** LAPERRIERE , JAMES

**TREASURER**

**03/19/2022**

Electronic Signature of Signing Officer/Director Detail

Date