## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000517

Entity Name: O'BRIEN & GERE LIMITED INC.

**Current Principal Place of Business:** 

333 W WASHINGTON ST SYRACUSE. NY 13202

**Current Mailing Address:** 

PO BOX 4873

SYRACUSE, NY 13221 US

FEI Number: 16-1284512 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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

FILED Apr 14, 2017

**Secretary of State** 

CC7151709031

Officer/Director Detail:

Title ASVP Title CFOD

NameSUTPHEN, JOHN FNameMCNULTY, JOSEPH MAddress5100 BROCKWAY LANEAddress4922 CORNISH HEIGHTSCity-State-Zip:FAYETTEVILLE NY 13066City-State-Zip:SYRACUSE NY 13215

Title CEOD Title DIRECTOR

NameFOX, JAMES ANameBARRY, TIMOTHY JAddress333 W WASHINGTON STREETAddress333 W WASHINGTON STCity-State-Zip:SYRACUSE NY 13202City-State-Zip:SYRACUSE NY 13202

City-State-Zip: SYRACUSE NY 13202 City-State-Zip: SYRACUSE NY 13202

ASST. TREASURER Title **DIRECTOR** Title Name ZAWADZKI, EDWARD J BRYANT, KEVIN Name Address 333 W WASHINGTON ST Address 333 W WASHINGTON ST City-State-Zip: SYRACUSE NY 13202 SYRACUSE NY 13202 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name NOWLAN, THOMAS A Name KECK, RICHARD J

Address 301 E GERMANTOWN PIKE Address 12310 BEND CREEK LANE
City-State-Zip: EAST NORRITON PA 19401 City-State-Zip: PEARLAND TX 77584

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

SIGNATURE: JOHN F SUTPHEN ASST SECRETARY

Electronic Signature of Signing Officer/Director Detail

04/14/2017 Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name SEIDEL, ANDREW D

Address POBOX 1625

City-State-Zip: RANCHO SANTA FE CA 92067