## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001225

Entity Name: FRAMATOME INC.

**Current Principal Place of Business:** 

3315 OLD FOREST ROAD

LYNCHBURG, VA 24501

OF28

**Current Mailing Address:** 

3315 OLD FOREST ROAD

LEGAL - OF 28

LYNCHBURG, VA 24501 US

FEI Number: 54-1536465 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD.

#221E

Name

City-State-Zip:

PALM BEACH GARDENS, FL 33410 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** Jan 31, 2019

**Secretary of State** 

1366128754CC

Officer/Director Detail:

Title PRESIDENT & DIRECTOR Title SECRETARY

Name MIGNOGNA, GARY M Name ROYER, DAVID M

3315 OLD FOREST ROAD 3315 OLD FOREST ROAD Address Address

OF28

City-State-Zip: LYNCHBURG VA 24501 City-State-Zip: LYNCHBURG VA 24501

Title **CFO & DIRECTOR** 

WINEGARD, HERBERT M

**TREASURER** WILLIAMS, KATHERINE C Name Name HARRIS, LAURIE S

7207 IBM DRIVE Address Address 3315 OLD FOREST ROAD

City-State-Zip: CHARLOTTE NC 28262

City-State-Zip: LYNCHBURG VA 24501

Title ASSISTANT SECRETARY Title **CHAIRMAN** 

Name LELIEVRE. FREDERIC Address

7207 IBM DRIVE Address 1 PLACE JEAN MILLIER CLT 2F LEGAL

Title

**TOUR AREVA** 

CHARLOTTE NC 28262 City-State-Zip: City-State-Zip: COURBEVOIE 92400

Title **DIRECTOR** Title DIRECTOR

ROYER, DAVID M Name CORNAND, CATHERINE Name

3315 OLD FOREST ROAD Address Address 1 PLACE JEAN MILLIER **OF28** 

**TOUR AREVA** 

LYNCHBURG VA 24501 COURBEVOIE 92400 City-State-Zip:

## 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.

01/31/2019 SIGNATURE: DAVID ROYER SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

DIRECTOR Title Title PEO

GAIFFE, LIONEL Name Name KEY, KENDELL F

Address 1 PLACE JEAN MILLIER Address 7207 IBM DRIVE

TOUR AREVA

City-State-Zip: CHARLOTTE NC 28262 City-State-Zip: COURBEVOIE 92400