

**2023 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F03000005291

**Entity Name:** GHD SERVICES INC.**Current Principal Place of Business:**2055 NIAGARA FALLS BLVD  
SUITE #3  
NIAGARA FALLS, NY 14304**Current Mailing Address:**2055 NIAGARA FALLS BLVD  
SUITE #3  
NIAGARA FALLS, NY 14304**FEI Number:** 16-1229774**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 EXECUTIVE VICE-PRESIDENT,  
DIRECTOR  
Name GIANOPOULOS, JIM  
Address 2055 NIAGARA FALLS BLVD  
SUITE #3  
City-State-Zip: NIAGARA FALLS NY 14304

Title SECRETARY  
Name RAY, LINDSAY  
Address 455 PHILLIP STREET  
City-State-Zip: WATERLOO N2L 3X2

Title TREASURER  
Name MORAN, MICHAEL  
Address 2055 NIAGARA FALLS BLVD  
SUITE #3  
City-State-Zip: NIAGARA FALLS NY 14304

Title VP  
Name MOORE, BRIAN  
Address 4019 EAST FOWLER AVENUE  
City-State-Zip: TAMPA FL 33617

Title ASST. SECRETARY  
Name BOOKER, KIA  
Address 2055 NIAGARA FALLS BLVD  
SUITE #3  
City-State-Zip: NIAGARA FALLS NY 14304

Title PRESIDENT, DIRECTOR  
Name WHITON, THEODORE  
Address 2235 MERCURY WAY  
City-State-Zip: SANTA ROSA CA 95407

Title VP  
Name BAUMAN, WAYNE  
Address 4019 EAST FOWLER AVENUE  
City-State-Zip: TAMPA FL 33617

Title DIRECTOR  
Name WRIGHT, ASHLEY  
Address 999 HAY STREET  
City-State-Zip: PERTH 6000

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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:** KIA BOOKER**ASSISTANT SECRETARY 08/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KLIN, TOM  
Address 2055 NIAGARA FALLS BLVD #3  
City-State-Zip: NIAGARA FALLS NY 14304

Title VP  
Name CASEY, MEEGHAN  
Address 4019 EAST FOWLER AVENUE  
City-State-Zip: TAMPA FL 33617

Title VP  
Name DAVIE, STEVEN  
Address 2500 CLEAN WATER COURT  
SUITE 301  
City-State-Zip: BUFORD GA 30519

Title VP  
Name MCCUBBINS, SEAN  
Address 10 CHATHAM CENTER SOUTH DRIVE  
SUITE 500  
City-State-Zip: SAVANNAH GA 31405

Title ASSISTANT TREASURER  
Name ROSA, RAUL  
Address 2055 NIAGARA FALLS BLVD #3  
City-State-Zip: NIAGARA FALLS NY 14304