## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400000747

**Entity Name: MODUSLINK CORPORATION** 

**Current Principal Place of Business:** 

2000 MIDWAY LANE SMYRNA, TN 37167

**Current Mailing Address:** 

2000 MIDWAY LANE SMYRNA. TN 37167 US

FEI Number: 04-3400270 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:

Title

Electronic Signature of Registered Agent

Date

**FILED** Apr 15, 2024

**Secretary of State** 

6493661243CC

Officer/Director Detail:

**PRESIDENT** 

Title **CFO** Title DIRECTOR

VENABLE, CATHERINE L. Name Name VENABLE, CATHERINE L. 2000 MIDWAY LANE Address 2000 MIDWAY LANE Address City-State-Zip: SMYRNA TN 37167 SMYRNA TN 37167 City-State-Zip:

Title SENIOR VICE PRESIDENT Title CFO

Name WONG, JASON Name WONG, JASON

Address 2000 MIDWAY LANE Address 2000 MIDWAY LANE SMYRNA TN 37167 City-State-Zip: City-State-Zip: SMYRNA TN 37167

**SECRETARY** Title \/P Title

Name KEMPE, LENA Name MATTERA. MAUREEN

Address 2000 MIDWAY LANE Address 2000 MIDWAY LANE City-State-Zip: SMYRNA TN 37167 SMYRNA TN 37167 City-State-Zip:

Title **TREASURER** 

Name VENABLE, CATHERINE L. KHALIL, FAWAZ Name

2000 MIDWAY LANE Address 2000 MIDWAY LANE Address City-State-Zip: SMYRNA TN 37167 SMYRNA TN 37167 City-State-Zip:

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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.

04/15/2024 SIGNATURE: JASON WONG **CFO** 

## Officer/Director Detail Continued:

TitleCEOTitleDIRECTORNameKHALIL, FAWAZNameKHALIL, FAWAZAddress2000 MIDWAY LANEAddress2000 MIDWAY LANE

City-State-Zip: SMYRNA TN 37167 City-State-Zip: SMYRNA TN 37167