

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000003464

**Entity Name:** TAPESTRY SOLUTIONS, INC.**Current Principal Place of Business:**5643 COPLEY DRIVE  
SAN DIEGO, CA 92111-7903**Current Mailing Address:**5643 COPLEY DRIVE  
SAN DIEGO, CA 92111-7903 US**FEI Number: 33-0649297****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 DIRECTOR  
Name CARBARY, SHERRY ANN  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title DIRECTOR  
Name ROBERTS, MICHAEL  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title PRESIDENT  
Name WRIGHT, ROBIN C.  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title TREASURER  
Name MIMS, VERETT A  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title ASSISTANT TREASURER  
Name ROREM, NATALIE N  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title DIRECTOR  
Name WOOLF, KIMBERLY C  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

Title SECRETARY  
Name KUMAR, DANA E  
Address 5643 COPLEY DRIVE  
City-State-Zip: SAN DIEGO CA 92111-7903

*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: NATALIE N ROREM****ASSISTANT TREASURER 04/20/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date