

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000003291

**Entity Name:** PDP GROUP, INCORPORATED

**Current Principal Place of Business:**

10909 MCCORMICK ROAD  
HUNT VALLEY, MD 21031-1401

**Current Mailing Address:**

2200 HIGHWAY 121  
SUITE 100  
BEDFORD, TX 76021 US

**FEI Number:** 52-0997482

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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           PRESIDENT  
Name           ELLIS, SHAWN  
Address        10909 MCCORMICK ROAD  
City-State-Zip: HUNT VALLEY MD 21031-1401

Title           TREASURER, DIRECTOR, VP  
Name           MULLOY, ERIN  
Address        909 THIRD AVENUE  
City-State-Zip: NEW YORK CITY NY 10022

Title           SECRETARY, DIRECTOR, VP  
Name           SHALETTE, ERIKA  
Address        909 THIRD AVENUE, 33RD FLOOR  
City-State-Zip: NEW YORK, NY 10022

Title           VP  
Name           VERSCHOORE, CHARLES  
Address        10909 MCCORMICK ROAD  
City-State-Zip: HUNT VALLEY MD 21031

Title           ASSISTANT SECRETARY  
Name           OLIVER, MELANIE  
Address        2200 HIGHWAY 121  
                  SUITE 100  
City-State-Zip: BEDFORD, TX TX 76021

*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:** MELANIE OLIVER

**ASSISTANT SECRETARY    01/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date