

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003542

Entity Name: IROQUOIS NEW ENGLAND, INC.**Current Principal Place of Business:**251 LITTLE FALLS DRIVE
WILIMINGTON, DE 19808**Current Mailing Address:**P.O. BOX 806
OLEAN, NY 14760**FEI Number:** 26-3892584**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 CDS
Name BRANCH, LAURIE A ASST
Address 304 VANBUREN AVENUE
City-State-Zip: OLEAN NY 14760

Title SD
Name BRANCH-BENOLIEL, AMY L
Address 520 EAST GRAVERS LANE
City-State-Zip: WYNDMOOR PA 19038

Title VPD
Name CHIAPUSO, JOSEPH G
Address P.O. BOX 806
City-State-Zip: OLEAN NY 14760

Title PD
Name WARD, MATHEW L
Address 11202 BUCKHEAD CT
City-State-Zip: MIDLOTHIAN VA 23112

Title VP
Name CHIAPUSO, CHRISTOPHER J
Address 3295 WEST VALLEY VIEW DRIVE
City-State-Zip: ALLEGANY NY 14706

Title VP
Name BRANCH, THOMAS
Address 1840 WINDFALL
City-State-Zip: OLEAN NY 14760

Title VP
Name PRINCE, ROBERT
Address 25 ADAMS STREET
City-State-Zip: ELLICOTTVILLE NY 14731

Title VP
Name MCKAY, KEVIN
Address 39 SPARHAWK DR
City-State-Zip: LONDONBERRY NH 03053

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: LAURIE A BRANCH**ASSISTANT SECRETARY 04/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date