

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003877

**Entity Name:** LABELLA ASSOCIATES E&A, PC, INC.**Current Principal Place of Business:**300 STATE STREET  
ROCHESTER, NY 14614**Current Mailing Address:**300 STATE STREET  
ROCHESTER, NY 14614**FEI Number:** 16-1115731**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	CEOC
Name	ESTEBAN, SERGIO
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	PT
Name	HEALY, ROBERT
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	SVPS
Name	METZGER, STEVEN
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	VP
Name	HALEY, MICHAEL
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	VP
Name	KUKUVKA, MARK
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	VP
Name	MILLER, BRIAN
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	VP
Name	PIETERS, DANIEL
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

Title	VP
Name	PEPE, ROBERT
Address	300 STATE STREET
City-State-Zip:	ROCHESTER NY 14614

**Continues on page 2**

*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: ROBERT PEPE****VP****04/28/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name GARBRICK, DONALD  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name ROLOSON, JEFFREY  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name VENVERTLOH, RICHARD  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name PAPPONETTI, JOHN  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name GARBRICK, KEITH  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name LAYMAN, ROGER  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name SCHAFFRON, MICHAEL  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name WINDERL, MICHAEL  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name SENEAL, GREGORY  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614

Title VP  
Name HARKE, WILLIAM  
Address 300 STATE STREET  
City-State-Zip: ROCHESTER NY 14614