

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000000119

Entity Name: ELIOR, INC.

**Current Principal Place of Business:**

300 SOUTH TRYON STREET, SUITE 400  
CHARLOTTE, NC 28202

**Current Mailing Address:**

300 SOUTH TRYON STREET, SUITE 400  
CHARLOTTE, NC 28202 US

FEI Number: 26-2223480

Certificate of Status Desired: No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

**FILED**  
**Apr 14, 2022**  
**Secretary of State**  
**4004190864CC**

*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 SECRETARY  
Name MAYER-SCHULER , BRITTANY  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR  
Name COJAN , GILLES  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title CFO  
Name HUNT , JEFFREY  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title ASSISTANT TREASURER  
Name MCNAMARA , KEVIN  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title CHAIRMAN, DIRECTOR  
Name BAILEY , MICHAEL  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR, CEO  
Name POIROT , OLIVIER  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title EXECUTIVE VP, HUMAN RESOURCES  
Name AHERN , PATRICK  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR  
Name FONTANA , PEDRO  
Address TOUR ÉGÉE, 9/11 ALLÉE DE L'ARCHE  
City-State-Zip: PARIS LA DÉFENSE CEDEX FRANCE 92032

**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: BRITTANY MAYER-SCHULER

SECRETARY, BY  
LYNNETTE PENALBERT,  
ATTORNEY-IN-FACT

04/14/2022

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            GUILLEMOT , PHILIPPE  
Address        TOUR ÉGÉE, 9/11 ALLÉE DE L'ARCHE  
City-State-Zip: PARIS LA DÉFENSE CEDEX FRANCE 92032