

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002230

Entity Name: CAMELOT U.S. ACQUISITION 6 CO.**Current Principal Place of Business:**ATTN: TAX DEPT
1500 SPRING GARDEN STREET 4TH FLOOR
PHILADELPHIA, PA 19130**Current Mailing Address:**ATTN: TAX DEPT
1500 SPRING GARDEN STREET 4TH FLOOR
PHILADELPHIA, PA 19130 US**FEI Number:** 81-3715173**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, VP
Name	HANKS, RICHARD
Address	ATTN: TAX DEPT 1500 SPRING GARDEN STREET 4TH FLOOR
City-State-Zip:	PHILADELPHIA PA 19130

Title	DIRECTOR
Name	MARTIN, JULIO
Address	ATTN: TAX DEPT 1500 SPRING GARDEN STREET 4TH FLOOR
City-State-Zip:	PHILADELPHIA PA 19130

Title	SECRETARY
Name	REEVES, MARTIN
Address	ATTN: TAX DEPT 1500 SPRING GARDEN STREET 4TH FLOOR
City-State-Zip:	PHILADELPHIA PA 19130

Title	DIRECTOR, VP
Name	SULLIVAN, KATHLEEN A
Address	ATTN: TAX DEPT 1500 SPRING GARDEN STREET 4TH FLOOR
City-State-Zip:	PHILADELPHIA PA 19130

Title	TREASURER
Name	WRIGHT, ANDREW
Address	ATTN: TAX DEPT 1500 SPRING GARDEN STREET 4TH FLOOR
City-State-Zip:	PHILADELPHIA PA 19130

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: MARTIN REEVES**SECRETARY****04/19/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date