

**2026 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000007206

**Entity Name:** THOUGHTWORKS, INC.

**Current Principal Place of Business:**

200 EAST RANDOLPH STREET  
25TH FLOOR  
CHICAGO, IL 60601

**Current Mailing Address:**

200 EAST RANDOLPH STREET  
25TH FLOOR  
CHICAGO, IL 60601 US

**FEI Number:** 36-3888809

**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 SECRETARY  
Name MCKILLIP , CHRISTINE  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR  
Name MURPHY , CHRISTOPHER  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title CFO  
Name CUMMINS, ERIN  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title PRESIDENT, CEO, DIRECTOR  
Name SUTCLIFF, MICHAEL  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title TREASURER  
Name CONTRERAS, MOLLY  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR  
Name MATEIU, RAMONA  
Address 200 EAST RANDOLPH STREET  
25TH FLOOR  
City-State-Zip: CHICAGO IL 60601

*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:** CHRISTINE MCKILLIP

**SECRETARY**

01/24/2026

Electronic Signature of Signing Officer/Director Detail

Date