

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35215

Entity Name: PROFESSIONAL FACILITIES MANAGEMENT, INC.**Current Principal Place of Business:**220 WEYBOSSET STREET
PROVIDENCE, RI 02903**Current Mailing Address:**220 WEYBOSSET STREET
PROVIDENCE, RI 02903**FEI Number:** 05-0443372**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 DS
Name CUSHING, KATHARINE
Address C/O 7SISTERS LLC
420 EAST 61ST STREET APT 40A
City-State-Zip: NEW YORK NY 10065

Title CHAIRMAN, DIRECTOR
Name BREADY, RICHARD
Address 280 IRVING AVE
City-State-Zip: PROVIDENCE RI 02906

Title DIRECTOR
Name WALSH, JOSEPH W. ESQ.
Address 26 CRAWFORD AVE
City-State-Zip: WARWICK RI 02889

Title DIRECTOR
Name SCILLIA, ANTHONY CPA
Address MARCUM, LLP
555 LONG WHARF DRIVE 12TH
FLOOR
City-State-Zip: NEW HAVEN CT 06511

Title D
Name TANURY, THOMAS
Address 6 NEW ENGLAND WAY
City-State-Zip: LINCOLN RI 02865

Title DIRECTOR
Name SHECHTMAN, STEPHEN ESQ.
Address 1080 MAIN STREET
City-State-Zip: PAWTUCKET RI 02860

Title VC, DIRECTOR
Name FLANDERS, ROBERT G. JR., ESQ.
Address HINCKLEY ALLEN & SNYDER LLP
50 KENNEDY PLAZA SUITE 1500
City-State-Zip: PROVIDENCE RI 02903

Title DIRECTOR
Name BRAMLEY, JENNIFER
Address C/O COX COMMUNICATIONS
9 JP MURPHY HIGHWAY
City-State-Zip: WEST WARWICK RI 02893

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: NORBERT MONGEON, JR.

VP,T

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name EICHLER, LAWRENCE S.
Address 50 BENEFIT STREET
City-State-Zip: PROVIDENCE RI 02904

Title DIR
Name WALSH, ROBERT A. JR.
Address C/O NATIONAL EDUCATION ASSOCIATION
 99 BALD HILL ROAD
City-State-Zip: CRANSTON RI 02920

Title DIRECTOR
Name SCANLON, TIMOTHY R.
Address 615 JEFFERSON BOULEVARD
City-State-Zip: WARWICK RI 02886

Title VP, T
Name MONGEON, NORBERT JR.
Address 220 WEYBOSSET STREET
City-State-Zip: PROVIDENCE RI 02903