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| SCC eFile | 2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 216520710 |
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| 1.) CORPORATION NAME: CUSHMAN & WAKEFIELD, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: NY | DUE DATE: 5/31/2016 SCC ID NO: F0266397 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>149,900</td> </tr> <tr> <td>PREFER</td> <td>100</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 149,900 | PREFER | 100 |
|--|---|-------|------------|--------|---------|--------|-----|
| CLASS | AUTHORIZED | | | | | | |
| COMMON | 149,900 | | | | | | |
| PREFER | 100 | | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1290 AVENUE OF THE AMERICAS
 CITY/ST/ZIP: NEW YORK, NY 10104

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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| NAME: EDWARD C. FORST TITLE: PRES/CEO ADDRESS: 1290 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10104 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
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| NAME: GENE BOXER TITLE: SEC./DIRECTOR ADDRESS: 1290 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10104 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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| NAME: LIEM DO TITLE: TREASURER ADDRESS: 1290 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10104 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
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| NAME: MICHAEL J. BARTOLOTTA TITLE: EVP/CFO ADDRESS: 1290 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10104 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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| NAME: JOHN SANTORA TITLE: DIRECTOR ADDRESS: 1290 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10104 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

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| /s/ GENE BOXER | GENE BOXER, SEC./DIRECTOR | 5/31/2016 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.