

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005389

Entity Name: ON Q FINANCIAL, INC.**Current Principal Place of Business:**4800 N. SCOTTSDALE RD.
STE 5500
SCOTTSDALE, AZ 85251**Current Mailing Address:**4800 N. SCOTTSDALE RD.
STE 5500
SCOTTSDALE, AZ 85251**FEI Number: 51-0517525****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH 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	PCEO
Name	BERGMAN, JOHN F
Address	4800 N. SCOTTSDALE RD. #5500
City-State-Zip:	SCOTTSDALE AZ 85251

Title	S.V.P. COMPLIANCE
Name	SHIRLEY, BOYNTON
Address	4800 N. SCOTTSDALE RD. STE 5500
City-State-Zip:	SCOTTSDALE AZ 85251

Title	S.V.P. SALES
Name	DOWNING, MICHAEL
Address	4800 N. SCOTTSDALE RD. STE 5500
City-State-Zip:	SCOTTSDALE AZ 85251

Title	S.V.P. SECONDARY MARKETING
Name	DELEON, NELSON
Address	4800 N. SCOTTSDALE RD. STE 5500
City-State-Zip:	SCOTTSDALE AZ 85251

Title	S.V.P. BUSINESS DEVELOPMENT
Name	BUTLER, PAUL
Address	4800 N. SCOTTSDALE RD. STE 5500
City-State-Zip:	SCOTTSDALE AZ 85251

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: JOHN F. BERGMAN**PRESIDENT****01/12/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date