

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000000399

**Entity Name:** ACCUITY ASSET VERIFICATION SERVICES INC.

**Current Principal Place of Business:**

1007 CHURCH ST  
EVANSTON, IL 60201

**Current Mailing Address:**

1105 NORTH MARKET STREET  
SUITE 501  
WILMINGTON, DE 19807

**FEI Number:** 46-1851339

**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 DIRECTOR  
Name THOMPSON, KENNETH RII  
Address 9443 SPRINGBORO PIKE  
City-State-Zip: MIAMISBURG OH 45352

Title P, PRESIDENT  
Name NEWMAN, BRENT  
Address 1007 CHURCH ST  
City-State-Zip: EVANSTON IL 60201

Title SECRETARY  
Name SIMONTON, RENEE  
Address 1105 NORTH MARKET  
City-State-Zip: WILMINGTON DE 19801

Title DIRECTOR  
Name KELSEY, MARK  
Address 1000 ALDERMAN DR  
City-State-Zip: ALPHARETTA GA 30005

Title TREASURER  
Name PERRY, SUZANNE  
Address 230 PARK AVE  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10169

Title ASST. TREASURER  
Name HORGAN, MARY ANN  
Address 313 WASHINGTON ST - 4TH FLOOR  
City-State-Zip: NEWTON MA 02458

*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: RENEE SIMONTON**

**SECRETARY**

**01/24/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date