## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002768

Entity Name: SCRIP, INC.

**Current Principal Place of Business:** 

360 VETERANS' PARKWAY

SUITE 115

BOLINGBROOK, IL 60440

**Current Mailing Address:** 

360 VETERANS' PARKWAY

**SUITE 115** 

BOLINGBROOK, IL 60440 US

FEI Number: 37-0898556 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 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: MICHELE HOLDEN; ASST SECRETARY 02/27/2023

Electronic Signature of Registered Agent

Date

FILED Feb 27, 2023

**Secretary of State** 

8451371286CC

Officer/Director Detail:

City-State-Zip:

**SUITE 115** 

 Title
 DIRECTOR
 Title
 PRESIDENT/CEO

 Name
 MASSERY, LUKE
 Name
 MASSERY, LUKE

Address 360 VETERANS' PARKWAY Address 360 VETERANS' PARKWAY

SUITE 115

**SUITE 115** 

City-State-Zip: BOLINGBROOK IL 60440 City-State-Zip: BOLINGBROOK IL 60440

 Title
 TREASURER
 Title
 SECRETARY

 Name
 MASSERY, LUKE
 Name
 HOLDYK, CHRIS

Address 360 VETERANS' PARKWAY Address 360 VETERANS' PARKWAY

SUITE 115

BOLINGBROOK IL 60440 City-State-Zip: BOLINGBROOK IL 60440

Title ASSISTANT SECRETARY Title VP

Name MIELKE, HEATH Name MIELKE, HEATH

Address 360 VETERANS' PARKWAY Address 360 VETERANS' PARKWAY

SUITE 115 SUITE 115

City-State-Zip: BOLINGBROOK IL 60440 City-State-Zip: BOLINGBROOK IL 60440

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: HEATH MIELKE ASSISTANT SECRETARY 02/27/2023