

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000005791

**Entity Name:** RQAW CORPORATION

**Current Principal Place of Business:**

8770 NORTH ST STE 110  
FISHERS, IN 46038

**Current Mailing Address:**

8770 NORTH ST STE 401 STE 110  
SUITE 401  
FISHERS, IN 46038 US

**FEI Number:** 35-1127849

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC  
7901 4TH ST N STE 300  
ST. PETERSBURG, FL 33702 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:** DAVID ROBERTS

02/02/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name AZAR, ELIE P  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title SECRETARY  
Name CONNER, BLAKE  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title ASSISTANT SECRETARY  
Name DOYLE, CORRY  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title TREASURER  
Name DEBBI, ALON  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title VP  
Name THOMPSON, JAMES F  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title PRESIDENT  
Name CASLER, LISA  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title DIRECTOR  
Name SATTER, JONATHAN  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title DIRECTOR  
Name MILLER, JACK P  
Address 8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

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*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:** TROY WOODRUFF

PRESIDENT

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name            BINKLEY, JAMES B.  
Address         8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title           DIRECTOR  
Name            ROCHESTER, DARRELL K.  
Address         8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038

Title           DIRECTOR  
Name            URBAN, RHODES C.  
Address         8770 NORTH ST STE 110  
City-State-Zip: FISHERS IN 46038