

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004032

Entity Name: CREATIVE TESTING SOLUTIONS CORPORATION**Current Principal Place of Business:**2424 W ERIE DR
TEMPE, AZ 85282**Current Mailing Address:**2424 W ERIE DR
TEMPE, AZ 85282**FEI Number:** 27-1120123**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CAGLIOTI, SALLY
Address 2424 W ERIE DRIVE
City-State-Zip: TEMPE AZ 85282

Title TRUSTEE
Name WILDE, GARY M.D.
Address 6210 EAST OAK STREET
City-State-Zip: SCOTTSDALE AZ 85257-1101

Title TRUSTEE
Name CONNOR, J DANIEL
Address 6210 EAST OAK STREET
City-State-Zip: SCOTTSDALE AZ 85257-1101

Title TRUSTEE, CHAIRMAN
Name DOODRIDGE, DONALD
Address 2424 W ERIE DR
City-State-Zip: TEMPE AZ 85282

Title TRUSTEE, SECRETARY, TREASURER
Name AUBUCHON, JAMES P
Address 6210 EAST OAK STREET
City-State-Zip: SCOTTSDALE AZ 85257

Title ASST. SECRETARY
Name SHAH, BHAVI
Address 6210 E. OAK ST.
City-State-Zip: SCOTTSDALE AZ 85257

Title TRUSTEE, CFO
Name BARNES, SUSAN
Address 6210 E OAK ST.
City-State-Zip: SCOTTSDALE AZ 85257

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SALLY CAGLIOTI**PRESIDENT****01/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date