

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000006003

**Entity Name:** EQ FLORIDA, INC.

**Current Principal Place of Business:**

7202 EAST EIGHTH AVENUE  
TAMPA, FL 33619

**Current Mailing Address:**

17440 COLLEGE PARKWAY  
SUITE 300  
LIVONIA, MI 48152 US

**FEI Number:** 20-0414157

**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           FEELER, JEFFREY R  
Address        251 E. FRONT STREET  
                  SUITE 400  
City-State-Zip: BOISE ID 83702

Title           PRESIDENT  
Name           FEELER, JEFFREY R  
Address        251 E. FRONT STREET  
                  SUITE 400  
City-State-Zip: BOISE ID 83702

Title           VP  
Name           GERRATT, ERIC L  
Address        251 E. FRONT STREET  
                  SUITE 400  
City-State-Zip: BOISE ID 83702

Title           VP  
Name           BELL, SIMON G  
Address        251 E. FRONT STREET  
                  SUITE 400  
City-State-Zip: BOISE ID 83702

Title           SECRETARY  
Name           IPSEN, WAYNE R  
Address        251 E. FRONT STREET  
                  SUITE 400  
City-State-Zip: BOISE ID 83702

*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:** WAYNE R. IPSEN

**SECRETARY**

**02/24/2015**

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

\_\_\_\_\_  
Date