

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000310

**FILED**  
**May 01, 2018**  
**Secretary of State**  
**CC3798958433**

**Entity Name:** NAVIGANT CYMETRIX CORPORATION

**Current Principal Place of Business:**

2875 MICHELLE DRIVE; SUITE 250  
IRVINE, CA 92606

**Current Mailing Address:**

150 N RIVERSIDE PLZ  
CORP TAX 2100  
CHICAGO, IL 60606 US

**FEI Number:** 20-2858838

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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, DIRECTOR

Name            HOWARD, JULIE M

Address        150 N RIVERSIDE PLZ  
                  2100

City-State-Zip: CHICAGO IL 60606

Title            SECRETARY, DIRECTOR

Name            WEED, MONICA M

Address        150 N RIVERSIDE PLZ  
                  2100

City-State-Zip: CHICAGO IL 60606

Title            AUTHORIZED REPRESENTATIVE

Name            FUCHS, KEVIN W

Address        150 N RIVERSIDE PLZ  
                  CORP TAX 2100

City-State-Zip: CHICAGO IL 60606

*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:** KEVIN W FUCHS

**AUTHORIZED  
REPRESENTATIVE**

**05/01/2018**

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

\_\_\_\_\_  
Date