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

DOCUMENT# F08000000450

Entity Name: INRIX, INC.

**Current Principal Place of Business:** 

10210 NE POINTS DRIVE

SUITE 400

KIRKLAND, WA 98033

**Current Mailing Address:** 

10210 NE POINTS DRIVE

SUITE 400

KIRKLAND, WA 98033 US

FEI Number: 20-1296081 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Feb 26, 2023

Secretary of State

8817489391CC

Officer/Director Detail:

SUITE 400

Title **DIRECTOR** Title DIRECTOR

Name GERLING, MIKE Name POSAWATZ, TONY

Address 10210 NE POINTS DRIVE Address 10210 NE POINTS DRIVE

SUITE 400

KIRKLAND WA 98033 KIRKLAND WA 98033 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title DIRECTOR

IRVINE, DIANE ASCHER, BRIAN Name Name

10210 NE POINTS DRIVE 10210 NE POINTS DRIVE Address Address SUITE 400

SUITE 400

City-State-Zip: KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

Title DIRECTOR Title **DIRECTOR** 

VANDERMULEN, KENDRA JOHNSTON, JOHN Name Name

10210 NE POINTS DRIVE 10210 NE POINTS DRIVE Address Address

SUITE 400 SUITE 400

City-State-Zip: KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

Title DIRECTOR, PRESIDENT Title **SECRETARY** 

Name MISTELE, BRYAN Name LINDSAY, KRISTIN

10210 NE POINTS DRIVE 10210 NE POINTS DRIVE Address Address

> SUITE 400 SUITE 400

KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

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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.

02/26/2023 **CFO** SIGNATURE: THADD STRICKER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title TREASURER/CFO Name STRICKER, THADD

10210 NE POINTS DRIVE SUITE 400 Address

City-State-Zip: KIRKLAND WA 98033