

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002724

**Entity Name:** FORUM US, INC.

**Current Principal Place of Business:**

920 MEMORIAL CITY WAY SUITE 1000  
HOUSTON, TX 77024

**Current Mailing Address:**

920 MEMORIAL CITY WAY SUITE 1000  
HOUSTON, TX 77024

**FEI Number:** 26-3748750

**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            HARRIS, JAMES W  
Address        920 MEMORIAL CITY WAY SUITE 1000  
  
City-State-Zip: HOUSTON TX 77024

Title            VP, DIRECTOR  
Name            IYYANKI, PRADY  
Address        920 MEMORIAL CITY WAY SUITE 1000  
  
City-State-Zip: HOUSTON TX 77024

Title            T  
Name            WILLIAMS, D. LYLE  
Address        920 MEMORIAL CITY WAY SUITE 1000  
  
City-State-Zip: HOUSTON TX 77024

Title            VP, S  
Name            MCCULLOCH, JIM  
Address        920 MEMORIAL CITY WAY SUITE 1000  
  
City-State-Zip: HOUSTON TX 77024

Title            ASST. TREASURER  
Name            TORGESEN, DENISE  
Address        920 MEMORIAL CITY WAY SUITE 1000  
  
City-State-Zip: HOUSTON TX 77024

*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:** DENISE TORGESEN

**ASST TREASURER**

**05/01/2017**

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

\_\_\_\_\_  
Date