

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001786

Entity Name: INEIGHT INC.**Current Principal Place of Business:**9977 N 90TH ST
SUITE 250
SCOTTSDALE, AZ 85258**Current Mailing Address:**9977 N 90TH ST
SUITE 250
SCOTTSDALE, AZ 85258 US**FEI Number:** 46-2970491**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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	PCEO
Name	MACHOLTZ, JAKE
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

Title	S
Name	NORTON, MICHAEL F
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

Title	T
Name	THOMAS, STEPHEN S
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

Title	DIRECTOR
Name	SCHMIDT, SCOTT A
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

Title	VP
Name	DEMULLING, TRENT M
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

Title	ASSISTANT SECRETARY
Name	KAMPSCHNEIDER, DEAN J
Address	1000 KIEWIT PLAZA
City-State-Zip:	OMAHA NE 68131

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: MICHAEL F NORTON**SECRETARY****02/15/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date