2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005299 Entity Name: EQUICLAIM, INC.

Current Principal Place of Business:

535 EAST DIEHL ROAD SUITE 150

NAPERVILLE, IL 60563

Current Mailing Address:

ATTN: LA SONIA MOSS 3055 LEBANON PIKE, SUITE 1000

NASHVILLE, TN 37214 US

FEI Number: 26-3014624 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324-2525 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

FILED May 05, 2016

Secretary of State

CC6200675117

Officer/Director Detail:

Title **PRES** Title **TREA**

Name DE CRESCENZO, NEIL E Name RANDY, GILES

3055 LEBANON PIKE, SUITE 1000 3055 LEBANON PIKE, SUITE 1000 Address Address

NASHVILLE TN 37214 City-State-Zip: NASHVILLE TN 37214 City-State-Zip:

ASEC Title SEC Title

Name LOWELL, STOKES GREGORY, STEVENS T Name

Address 3055 LEBANON PIKE, SUITE 1000 Address 3055 LEBANON PIKE, SUITE 1000

City-State-Zip: NASHVILLE TN 37214 City-State-Zip: NASHVILLE TN 37214

Title VР Title **ASEC**

JEFF, KERLEY Name Name DENISE, CEULE

Address 3055 LEBANON PIKE, SUITE 1000 Address 3055 LEBANON PIKE, SUITE 1000

City-State-Zip: NASHVILLE TN 37214 City-State-Zip: NASHVILLE TN 37214

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.