

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002000

Entity Name: C T I CLAIM AUDIT TECHNOLOGIES CORP.**Current Principal Place of Business:**100 COURT AVE
SUITE 306
DES MOINES, IA 50309**Current Mailing Address:**100 COURT AVE
SUITE 306
DES MOINES, IA 50309**FEI Number:** 42-1414040**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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, DIRECTOR
Name BRANDT, DONALD R
Address 100 COURT AVENUE
 SUITE 306
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name BRANDT, DALE A
Address 2735 KENNETH PLACE
City-State-Zip: TEMPE AZ 85282

Title SECRETARY, TREASURER
Name BRANDT, RANDALL J
Address 100 COURT AVENUE
 SUITE 306
City-State-Zip: DES MOINES IA 50309

Title VP
Name RATER, ROBERT A
Address 100 COURT AVENUE
 SUITE 306
City-State-Zip: DES MOINES IA 50309

Title ASST VP
Name SUCKOW, MICHELLE R
Address 100 COURT AVENUE
 SUITE 306
City-State-Zip: DES MOINES IA 50309

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: ROBERT RATER**VICE PRESIDENT****03/27/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date