## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000003009

Entity Name: ACCERTIFY, INC.

**Current Principal Place of Business:** 

2 PIERCE PLACE SUITE 900 ITASCA, IL 60143

**FILED** Mar 23, 2025 **Secretary of State** 3400081714CC

## **Current Mailing Address:**

2 PIERCE PLACE SUITE 900 ITASCA, IL 60143 US

FEI Number: 26-2708428 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CT 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:

SUITE 900

**PRESIDENT** Title Title CFO

MICHELON, MARK FRANK **BRONSTEIN. ANDREW** Name Name

Address 2 PIERCE PLACE Address 2 PIERCE PLACE

SUITE 900

ITASCA IL 60143 ITASCA IL 60143 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title **DIRECTOR** 

MONTVILLE, JULANNE MICHELON, MARK FRANK Name Name

2 PIERCE PLACE 2 PIERCE PLACE Address Address SUITE 900

SUITE 900

City-State-Zip: ITASCA IL 60143 City-State-Zip: ITASCA IL 60143

Title Title **DIRECTOR DIRECTOR** 

**BRONSTEIN, ANDREW** MONTVILLE, JULANNE Name Name

2 PIERCE PLACE 2 PIERCE PLACE Address Address SUITE 900

SUITE 900

City-State-Zip: ITASCA IL 60143 City-State-Zip: ITASCA IL 60143

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: JULANNE MONTVILLE

SECRETARY

03/23/2025