## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000001101

Entity Name: EQUIX INTEGRITY SOUTHEAST, INC.

**Current Principal Place of Business:** 

46 S. ROLLING MEADOWS DRIVE FOND DU LAC. WI 54937

**Current Mailing Address:** 

46 S. ROLLING MEADOWS DRIVE FOND DU LAC, WI 54937 US

FEI Number: 84-4853680 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION 1200 S. PINE ISLAND RD. #250 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

FILED Mar 06, 2025

**Secretary of State** 

3202370484CC

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name MEYER, TODD Name DEBELAK, MICHAEL

Address 46 S. ROLLING MEADOWS DRIVE Address 46 S. ROLLING MEADOWS DRIVE

City-State-Zip: FOND DU LAC WI 54937 City-State-Zip: FOND DU LAC WI 54937

Title PRESIDENT Title SECRETARY
Name DEBELAK, MICHAEL Name MEYER, TODD

Address 46 S. ROLLING MEADOWS DRIVE Address 46 S. ROLLING MEADOWS DRIVE

City-State-Zip: FOND DU LAC WI 54937 City-State-Zip: FOND DU LAC WI 54937

Title TREASURER Title VP

Name SCHILL, TROY Name UNDICELLI, ANDREW

Address 46 S. ROLLING MEADOWS DRIVE Address 46 S. ROLLING MEADOWS DRIVE

City-State-Zip: FOND DU LAC WI 54937 City-State-Zip: FOND DU LAC WI 54937

Title EXECUTIVE VICE PRESIDENT

Name MEYER, TODD

Address 46 S. ROLLING MEADOWS DRIVE

City-State-Zip: FOND DU LAC WI 54937

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: TODD MEYER SECRETARY 03/06/2025

Electronic Signature of Signing Officer/Director Detail

Date