

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 348513

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** FRESHPOINT NORTH FLORIDA, INC.

**Current Principal Place of Business:**

3100 HILTON STREET  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

1390 ENCLAVE PKWY  
HOUSTON, TX 770772099 US

**New Mailing Address:**

**FEI Number:** 59-1262727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: STURGEON, BRIAN M  
Address: 1390 ENCLAVE PKWY  
City-St-Zip: HOUSTON, TX 77077

Title: T  
Name: GISH, KATHY O  
Address: 1390 ENCLAVE PKWY  
City-St-Zip: HOUSTON, TX 77077

Title: VPS  
Name: KURZ, THOMAS P  
Address: 1390 ENCLAVE PKWY  
City-St-Zip: HOUSTON, TX 77077

Title: AS  
Name: BROOKS, CONNIE S  
Address: 1390 ENCLAVE PKWY  
City-St-Zip: HOUSTON, TX 77077

Title: P  
Name: GARDNER, BRETT  
Address: 3100 HILTON STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP  
Name: GREEN, BARBARA B  
Address: 1390 ENCLAVE PARKWAY  
City-St-Zip: HOUSTON, TX 77077

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: BARBARA B. GREEN

VP

04/16/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date