

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004823

FILED
Mar 25, 2010
Secretary of State

Entity Name: FREEZE OPERATIONS HOLDING CORP.

Current Principal Place of Business:

1855 BOSTON RD
WILBRAHAM, MA 01095

New Principal Place of Business:

Current Mailing Address:

1855 BOSTON RD
WILBRAHAM, MA 01095

New Mailing Address:

FEI Number: 26-0725239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPCE
Name: LIDVALL, NED R
Address: 115 HIGH PINE CIRCLE
City-St-Zip: WILBRAHAM, MA 01095

Title: D
Name: METZ, CHRISTOPHER
Address: 539 MIDDLE ROAD
City-St-Zip: GULF STREAM, FL 33483

Title: SV
Name: SAWYER, ROBERT K JR
Address: 256 THREE RIVERS ROAD
City-St-Zip: WILBRAHAM, MA 01095

Title: VCFO
Name: SANCHIONI, STEVEN C
Address: 1 WILDWOOD LANE
City-St-Zip: WILBRAHAM, MA 01095

Title: T
Name: SCHWENDENMANN, T. TODD
Address: 16 WEST COLONIAL ROAD
City-St-Zip: WILBRAHAM, MA 01095

Title: D
Name: SKILLEN, R. LYNN
Address: 16331 SW 23RD STREET
City-St-Zip: MIRAMAR, FL 33027

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: STEVEN C. SANCHIONI

VCFO

03/25/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date