

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32731

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** SCHOFIELD CORPORATION OF ORLANDO

**Current Principal Place of Business:**

18500 NORTH ALLIED WAY  
PHOENIX, AZ 85054 US

**New Principal Place of Business:**

**Current Mailing Address:**

18500 NORTH ALLIED WAY  
PHOENIX, AZ 85054 US

**New Mailing Address:**

**FEI Number:** 59-3047860      **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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BOUCHER, ROBERT  
Address: 16800 GREENSPOINT PARK DRIVE, SUITE 225N  
City-St-Zip: HOUSTON, TX 77060 US

Title: SEC  
Name: SCHULER, EILEEN B  
Address: 18500 NORTH ALLIED WAY  
City-St-Zip: PHOENIX, AZ 85054 US

Title: TDIR  
Name: LANG, III, EDWARD A  
Address: 18500 NORTH ALLIED WAY  
City-St-Zip: PHOENIX, AZ 85054 US

Title: VPAS  
Name: BENTER, TIM M  
Address: 18500 NORTH ALLIED WAY  
City-St-Zip: PHOENIX, AZ 85054 US

Title: EVPD  
Name: WALBRIDGE, KEVIN  
Address: 18500 NORTH ALLIED WAY  
City-St-Zip: PHOENIX, AZ 85054 US

Title: DIR  
Name: SERIANNI, CHARLES F  
Address: 18500 NORTH ALLIED WAY  
City-St-Zip: PHOENIX, AZ 85054 US

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: KELLY LETTMANN

POA

04/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date