

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000003388

**Entity Name:** GLOBAL INFUSION, INC.

**Current Principal Place of Business:**

118 NORTH PETERS ROAD  
SUITE 220  
KNOXVILLE, TN 37923

**Current Mailing Address:**

118 NORTH PETERS ROAD  
SUITE 220  
KNOXVILLE, TN 37923 US

**FEI Number: 06-1690615**

**Certificate of Status Desired: No**

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

HAWARD, JONATHAN  
1308 SHADYBROOK COVE LANE  
KNOXVILLE, FL 37922 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:** JONATHAN HAWARD

04/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HAWARD, JONATHAN  
Address 1308 SHADYBROOK COVE LANE  
City-State-Zip: KNOXVILLE TN 37922

Title S  
Name MCCORD, JENNIFER  
Address 3111 CORDOBA RANCH BOULEVARD  
City-State-Zip: LUTZ FL 33559

Title VP  
Name HAWARD, JOHN  
Address 2044 BISHOPS BRIDGE ROAD  
City-State-Zip: KNOXVILLE TN 37922

Title T  
Name PAUL, HOKER  
Address 3923 VINE STREET  
City-State-Zip: PLEASANTON CA 94566

Title D  
Name HAWARD, JUDY  
Address 2044 BISHOPS BRIDGE ROAD  
City-State-Zip: KNOXVILLE TN 37922

Title D  
Name KOEHN, JOSEPH  
Address 1116 COBBLE WAY  
City-State-Zip: MARYVILLE TN 37803

Title D  
Name MEEKS, MITCHELL  
Address 11312 HIXSON PIKE  
City-State-Zip: SODDY-DAISY TN 37379

Title D  
Name HAWARD, JOSCELYN  
Address 1308 SHADYBROOK COVE LANE  
City-State-Zip: KNOXVILLE TN 37922

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*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSEPH KOEHN

**DIRECTOR**

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name MCCORD, MICHAEL  
Address 3111 CORDOBA RANCH BOULEVARD  
City-State-Zip: LUTZ FL 33559

Title D  
Name HOKER, LARISSA  
Address 3923 VINE STREET  
City-State-Zip: PLEASANTON CA 94566

Title D  
Name KOEHN, JOSEPHINE  
Address 1116 COBBLE WAY  
City-State-Zip: MARYVILLE TN 37803