2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32731

Entity Name: SCHOFIELD CORPORATION OF ORLANDO

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 59-3047860 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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 Apr 12, 2018

Secretary of State

CC5175203866

Officer/Director Detail:

Title DIRECTOR Title TREASURER

Name GOEBEL, BRIAN A. Name BOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title SECRETARY Title VP, TAX

NameSCHULER, EILEEN B.NameFOCAZIO, LAWRENCEAddress18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAYCity-State-Zip:PHOENIX AZ 85054City-State-Zip:PHOENIX AZ 85054

TitleVP, ASSISTANT SECRETARYTitleVP, ASSISTANT SECRETARYNameWILHOIT, ADRIENNE W.NameULREICH-POWER, THOMASAddress18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VI

Name STUART, TIMOTHY E. Name SCHULER, EILEEN B.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

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

SIGNATURE: EILEEN B. SCHULER SECRETARY 04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, ASSISTANT SECRETARY Title VP, ASSISTANT SECRETARY

Name NICKERSON, JOHN Name KORT, MYNDI M.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP

Name BOYER, ROBERT B. Name BENTER, TIM M.

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

VΡ

Title

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title PRESIDENT

Name AMICK, JAMEY Name CABBIL, NATHAN

Address 323 MARBLE MILL ROAD Address 18500 NORTH ALLIED WAY

City-State-Zip: MARIETTA GA 30060 City-State-Zip: PHOENIX AZ 85054