

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000004730

**FILED**  
**Mar 15, 2016**  
**Secretary of State**  
**CC2884148979**

**Entity Name:** FREEMAN AUDIO VISUAL, INC.

**Current Principal Place of Business:**

1600 VICEROY DR  
SUITE 100  
DALLAS, TX 75235

**Current Mailing Address:**

P.O. BOX 660613  
DALLAS, TX 75266 US

**FEI Number:** 75-1375597

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title VP, TREASURER  
Name BAXLEY, WILLIAM H III  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

Title CHAIRMAN, CEO  
Name POPOLO, JOSEPH V JR.  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

Title AS, VP  
Name GOFF, DEREK W  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

Title VC  
Name FREEMAN PARSONS, CARRIE  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

Title EXECUTIVE VICE PRESIDENT, CFO  
Name RAMIREZ, JULIO  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

Title PRESIDENT  
Name SANDERS, KENNETH R  
Address 1600 VICEROY DRIVE  
SUITE 100  
City-State-Zip: DALLAS TX 75235

*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:** DEREK W. GOFF

VP

03/15/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date