

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001884

Entity Name: COMMUNITAS, INC.

Current Principal Place of Business:

8500 FREEPORT PKWY STE 400
IRVING, TX 75063

Current Mailing Address:

4800 DEERWOOD CAMPUS PARKWAY
BUILDING 100
JACKSONVILLE, FL 32246 US

FEI Number: 75-2493178

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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: BILL HARVE

02/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name PASCULLO, JOSEPH
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title PRESIDENT
Name MANKIN, DWIGHT
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title TREASURER
Name CASE, SCOTT
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title SECRETARY
Name PASCULLO, JOSEPH
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title DIRECTOR
Name URBANEK, JOHN
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title DIRECTOR
Name HARRISON, CAMILLE
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title DIRECTOR
Name DAVITA, CHARLES
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

Title DIRECTOR
Name VAN ESSENDELFT, SETH
Address 8500 FREEPORT PKWY STE 400
City-State-Zip: IRVING TX 75063

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: DWIGHT MANKIN

PRESIDENT

02/24/2023

Electronic Signature of Signing Officer/Director Detail

Date