

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851196

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** REYNA CAPITAL CORPORATION

**Current Principal Place of Business:**

ONE REYNOLDS WAY  
TAX DEPARTMENT  
KETTERING, OH 45430

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2608  
DAYTON, OH 45401

**New Mailing Address:**

**FEI Number:** 31-1014403

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
C/O CT 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: DCEO  
Name: BROCKMAN, ROBERT T  
Address: 6700 HOLLISTER  
City-St-Zip: HOUSTON, TX 77040

Title: D  
Name: THORPE, ALFRED J  
Address: 2700 POST OAK BLVD #1440  
City-St-Zip: HOUSTON, TX 77056

Title: P  
Name: NALLEY, ROBERT M  
Address: 6700 HOLLISTER  
City-St-Zip: HOUSTON, TX 77040

Title: VP  
Name: AGAN, DANIEL S  
Address: 6700 HOLLISTER  
City-St-Zip: HOUSTON, TX 77040

Title: T  
Name: BURNETT, ROBERT D  
Address: 6700 HOLLISTER  
City-St-Zip: HOUSTON, TX 77040

Title: S  
Name: BUNNEY, KENNETH E  
Address: ONE REYNOLDS WAY  
City-St-Zip: DAYTON, OH 45430

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: WILLIAM W MATTESON

AS

03/20/2012

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

\_\_\_\_\_  
Date