

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004789

Entity Name: DH COOPERATIVE, INC.

FILED
May 01, 2012
Secretary of State

Current Principal Place of Business:

125 POWDER FOREST DRIVE
SIMSBURY, CT 06070

New Principal Place of Business:

Current Mailing Address:

6095 PARKLAND BLVD.
310
MAYFIELD HTS, OH 44124

New Mailing Address:

FEI Number: 06-0711238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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: P
Name: BURNETT, BRIAN E
Address: 125 POWDER FOREST DRIVE
City-St-Zip: SIMSBURY, CT 06070

Title: VPD
Name: LUTZ, ROBERT S
Address: 2200 PENNSYLVANIA AVE. NW - SUITE 800W
City-St-Zip: WASHINGTON, DC 20037

Title: VP
Name: SMITH, LAURENCE S
Address: 2200 PENNSYLVANIA AVE. NW - SUITE 800W
City-St-Zip: WASHINGTON, DC 20037

Title: AS/T
Name: SCHWERTNER, CHARLES A
Address: 6095 PARKLAND BLVD SUITE 310
City-St-Zip: MAYFIELD HTS, OH 44124

Title: TD
Name: MCFADEN, FRANK T
Address: 2200 PENNSYLVANIA AVE - SUITE 800W
City-St-Zip: WASHINGTON, DC 20037

Title: VPS
Name: O'REILLY, JAMES F
Address: 2200 PENNSYLVANIA AVE NW - SUITE 800W
City-St-Zip: WASHINGTON, DC 20037

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: CHARLES A SCHWERTNER

AS/T

05/01/2012

Electronic Signature of Signing Officer or Director

Date