## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an

address, with all other like empowered.

## Secretary of State DOCUMENT # F01000002165 01-16-2007 90206 010 \*\*\*150.00 1. Entity Name PHNŚ INC. Principal Place of Business Mailing Address 60001017 5400 LBJ FRWY 5400 LBJ FRWY #200 #200 DALLAS, TX 75240 DALLAS, TX 75240 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052007 CR2E034 (12/06) Cha-P City & State City & State 4 FFI Number Applied For 75-2847104 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registored Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zin Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change Addition TITLE ☐ Delete TITLE FITZGERALD, H. JAMES NAME NAME STREET ADDRESS 5905 PATRIOTS WAY STREET ADDRESS EAST LANSING, MI 48823 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME FLYNN, THOMAS J NAME STREET ADDRESS 10 GLENVILLE STREET STREET ADDRESS GREENWICH, CT 06831 CITY-ST-ZIP CITY-ST-ZIP ☐ Deleta TITLE ☐ Addition TITLE LEE, JAMES G HILINSKI, JAMES G NAME NAME STREET ADDRESS 1801 RESEARCH BOULEVARD, STE 300 STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ROCKVILLE, MD 20850 ☐ Delete TITLE ☐ Change ☐ Addition TITLE HOLMAN, WILLIAM R NAME NAME 8585 PICARDY AVE. 1ST FLOOR STREET ADDRESS STREET ADDRESS BATON ROUGE, LA 70809 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE HOPPER, MAX D NAME NAME 6320 LBJ FRWY, STE 220 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75240 CITY-ST-ZIP TITI F ☐ Change TITLE □ Delete ☐ Addition INCARNATI, PHILIP A NAME NAME STREET ADDRESS G\*3235 BEECHER ROAD, STE B STREET ADDRESS CITY-ST-ZIP FLINT, MI 48532 CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

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