

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 14, 2012
Secretary of State

Entity Name: COOPER MEDICAL BUILDINGS, INC.

Current Principal Place of Business:

7100 N. CLASSEN BLVD, STE 500
OKLAHOMA CITY, OK 731167104

New Principal Place of Business:

Current Mailing Address:

7100 N. CLASSEN BLVD, STE 500
OKLAHOMA CITY, OK 731167104

New Mailing Address:

8404 INDIAN HILLS DRIVE
OMAHA, NE 68114

FEI Number: 73-1289042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T 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: DP
Name: LISAK, DOUGLAS E
Address: 13913 MASTIN STREET
City-St-Zip: OVERLAND PARK, KS 66221

Title: VP
Name: COOPER, CHRISTOPHER D
Address: 5501 NW 121ST
City-St-Zip: OKLAHOMA CITY, OK 73162

Title: VP
Name: COOPER, STEVE L
Address: 2516 SOMMERSET PLACE
City-St-Zip: OKLAHOMA CITY, OK 73116

Title: S
Name: PACHMAN, LOUIS J
Address: 5008 CHICAGO STREET
City-St-Zip: OMAHA, NE 68132

Title: T
Name: HARTNETT, CHAD M
Address: 17407 CADY CIRCLE
City-St-Zip: OMAHA, NE 68116

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: CHAD M HARTNETT

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04/14/2012

Electronic Signature of Signing Officer or Director

Date