

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90024 048 ***150.00

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1. Entity Name
FLORIDA - NOC, INC.



Principal Place of Business
6363 WOODWAY, SUITE 1000
HOUSTON, TX 77057

Mailing Address
6363 WOODWAY, SUITE 1000
HOUSTON, TX 77057

DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2258584

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DINNERSTEIN, JACK
STREET ADDRESS 6363 WOODWAY, SUITE 1000
CITY-ST-ZIP HOUSTON, TX 77057

TITLE VCD
NAME DINNERSTEIN, T H
STREET ADDRESS 6363 WOODWAY, SUITE 1000
CITY-ST-ZIP HOUSTON, TX 77057

TITLE S
NAME CALTAGIRONE, VINCENT T III
STREET ADDRESS 6363 WOODWAY, SUITE 1000
CITY-ST-ZIP HOUSTON, TX 77057

TITLE T
NAME HUSMANN, RANDALL
STREET ADDRESS 6363 WOODWAY, SUITE 1000
CITY-ST-ZIP HOUSTON, TX 77057

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randall Husmann CFO
1/15/2007 713 570 0312
Date Daytime Phone *