

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000840

FILED
May 23, 2012
Secretary of State

Entity Name: PROFESSOR CONNOR'S, INC.

Current Principal Place of Business:

400 PLAZA DRIVE
SECAUCUS, NJ 07094

New Principal Place of Business:

Current Mailing Address:

PO BOX 2157
SECAUCUS, NJ 070962157

New Mailing Address:

FEI Number: 20-1884894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOYNER, JUSTIN
1334 WALNUT ST
JACKSONVILLE, FL 32260 US

Name and Address of New Registered Agent:

JOYNER, JUSTIN
1334 WALNUT ST
JACKSONVILLE, FL 32260 US

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: JUSTIN JOYNER

05/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: NORRIS, CHARLES
Address: 481 DENSLOW AVE
City-St-Zip: LOS ANGELES, CA 90049

Title: VC
Name: HARNED, CHRIS
Address: 66 E 55TH ST FL 28
City-St-Zip: NEW YORK, NY 100223206

Title: CEO
Name: THOMPSON, RICHARD
Address: 400 PLAZA DR
City-St-Zip: SECAUCUS, NJ 07094

Title: SEC
Name: MACCHIAVERNA, STEPHEN
Address: 400 PLAZA DR
City-St-Zip: SECAUCUS, NJ 07094

Title: CFO
Name: KASSAR, RICHARD
Address: 400 PLAZA DRIVE
City-St-Zip: SECAUCUS, NJ 07094

Title: SVP
Name: MORRIS, SCOTT
Address: 400 PLAZA DRIVE
City-St-Zip: SECAUCUS, NJ 07094

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: STEPHEN MACCHIAVERNA

SEC

05/23/2012

Electronic Signature of Signing Officer or Director

Date