

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65948

Entity Name: NOXON COMPANY

FILED  
Apr 14, 2011  
Secretary of State

**Current Principal Place of Business:**

1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

821 HASTINGS ST  
STE 8  
TRAVERSE CITY, MI 49686 US

**New Mailing Address:**

FEI Number: 65-0096858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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: D  
Name: HOAGLAND, JAMES H  
Address: 134 LIGHTHOUSE ROAD  
City-St-Zip: HUBBARDS, NS B0J1T0 CN

Title: D  
Name: HOAGLAND, SHARON N  
Address: 134 LIGHTHOUSE ROAD  
City-St-Zip: HUBARDS, NS B0J1T0 CN

Title: DP  
Name: HOAGLAND, JOHN T  
Address: 6168 TAMARACK LANE  
City-St-Zip: MAPLE CITY, MI 49664 US

Title: D  
Name: HOAGLAND, NANCY L  
Address: 24654 RODEO FLAT ROAD  
City-St-Zip: AUBURN, CA 95602 US

Title: DV  
Name: MAGOUN, PETER R  
Address: 9888 PENINSULA DRIVE  
City-St-Zip: TRAVERSE CITY, MI 49686 US

Title: STD  
Name: MAGOUN, ANNE H  
Address: 9888 PENINSULA DRIVE  
City-St-Zip: TRAVERSE CITY, MI 49686 US

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: ANNE H MAGOUN

SEC

04/14/2011

Electronic Signature of Signing Officer or Director

Date