

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011914

FILED  
Mar 19, 2012  
Secretary of State

**Entity Name:** NORTHSTAR RELIEF, INC.

**Current Principal Place of Business:**

6000 FAIRVIEW ROAD  
SUITE 7000  
CHARLOTTE, NC 28210

**New Principal Place of Business:**

5064 OAKWOOD AVE  
LA CANADA FLINTRIDGE, CA 91011

**Current Mailing Address:**

6000 FAIRVIEW ROAD  
SUITE 7000  
CHARLOTTE, NC 28210

**New Mailing Address:**

5064 OAKWOOD AVE  
LA CANADA FLINTRIDGE, CA 91011

**FEI Number:** 27-1410721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PONCE, EDDIE  
14553 STARBUCK SPRINGS WAY  
JACKSONVILLE, FL 32258 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: PD  
Name: DUNLAP, ALEXANDER  
Address: 70 WEST MADISON 2ND FLOOR C/O MSSB  
City-St-Zip: CHICAGO, IL 60602

Title: D  
Name: JOHNSON, ANGELA  
Address: 5064 OAKWOOD AVE  
City-St-Zip: LA CANADA FLINTRIDGE, CA 91011

Title: D  
Name: PONCE, EDDIE  
Address: 14553 STARBUCK SPRINGS WAY  
City-St-Zip: JACKSONVILLE, FL 32258

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES DUNLAP

PD

03/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date