2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2016
Secretary of State
CC7434299214

DOCUMENT# P93000086488

Entity Name: KHP, INC.

Current Principal Place of Business:

3001 WESTON PARKWAY
CARY, NC 27513

Current Mailing Address:

3001 WESTON PARKWAY
CARY, NC 27513 US

FEI Number: 56-1853333

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
FORT LAUDERDALE, FL 33324-4413 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR, PRESIDENT
Name	ATZ, JOHN C.
Address	1920 WEKIVA WAY SUITE 200
City-State-Zip:	WEST PALM BEACH FL 33411

Title	DIRECTOR
Name	BURNS, GREGORY B.
Address	12570 MERIT DRIVE SUITE 1000
City-State-Zip:	DALLAS TX 75251

Title	SECRETARY
Name	COOK, RICHARD N.
Address	3001 WESTON PARKWAY
City-State-Zip:	CARY NC 27513

Title	DIRECTOR
Name	MURPHY, TERENCE T.
Address	11400 COMMERCE PARK DR SUITE 400
City-State-Zip:	RESTON VA 20191

Title	DIRECTOR
Name	BARBER, BARRY L.
Address	3001 WESTON PARKWAY
City-State-Zip:	CARY NC 27513

Title	DIRECTOR
Name	CAVE, DERRICK B.
Address	445 24TH STREET SUITE 200
City-State-Zip:	VERO BEACH FL 32960

Title	TREASURER
Name	MCENTEE, DAVID L.
Address	3001 WESTON PARKWAY
City-State-Zip:	CARY NC 27513

Title	DIRECTOR
Name	PEED, BROOKS H.
Address	445 24TH STREET SUITE 200
City-State-Zip:	VERO BEACH FL 32960

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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: RICHARD N. COOK SECRETARY 04/04/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PENNY, H. DEAN
Address	333 FAYETTEVILLE STREET SUITE 600
City-State-Zip:	RALEIGH NC 27601

Title	DIRECTOR
Name	SCHILLER, MICHAEL G.
Address	7740 N 16TH STREET SUITE 300
City-State-Zip:	PHOENIX AZ 85020

Title	DIRECTOR
Name	SQUIRES, CHRISTOPHER A.
Address	11919 FOUNDATION PLACE SUITE 200
City-State-Zip:	GOLD RIVER CA 95670

Title	DIRECTOR
Name	TRIBBLE, G. BRADBURY
Address	2201 WEST ROYAL LANE SUITE 275
City-State-Zip:	IRVING TX 75063

Title	DIRECTOR
Name	WILSON, DEBORAH L.
Address	2 SUN COURT SUITE 450
City-State-Zip:	NORCROSS GA 30092

Title	DIRECTOR
Name	WILSON, MARK S.
Address	3001 WESTON PARKWAY
City-State-Zip:	CARY NC 27513