2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32731

Entity Name: SCHOFIELD CORPORATION OF ORLANDO

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX. AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 59-3047860 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

FILED Apr 22, 2024

Secretary of State

7828370372CC

Officer/Director Detail:

Title	TREASURER	Title	ASSISTANT SECRETARY
Name	BOYD, CALVIN R.	Name	KASARJIAN, ASHLEY
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title ASSISTANT SECRETARY Title ASSISTANT SECRETARY Name WILHOIT, ADRIENNE W. Name NICKERSON, JOHN B. Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY PHOENIX AZ 85054 City-State-Zip: City-State-Zip: PHOENIX AZ 85054

Title SECRETARY Title VP, TAX

NameMCKEON, LAURENNameFOCAZIO, LAWRENCE D.Address18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP Title VP

NameKASARJIAN, ASHLEYNameNICKERSON, JOHN B.Address18500 NORTH ALLIED WAYAddress18500 NORTH ALLIED WAYCity-State-Zip:PHOENIX AZ 85054City-State-Zip:PHOENIX AZ 85054

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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: MCKEON, LAUREN SECRETARY 04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP

Name WILHOIT, ADRIENNE W.
Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title VP

Name AMICK, JR., JAMES G. Address 323 MARBLE MILL ROAD

City-State-Zip: MARIETTA GA 30060

Title DIRECTOR

Name CARLSEN, ELYSE M.

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title VP

Name RICHARDSON, LARSON
Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054

Title PRESIDENT

Name ARAMBULA, JULIA

Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054