2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003848

Entity Name: GENESIS FINANCIAL SOLUTIONS, INC.

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
8405 SW NIMBUS AVE						
A BEAVERTON, OR 97008						
Current Mailing Address:			New Mailing Address:			
8405 SW NIMBUS AVE			8405 SW NIMBUS AVE			
A BEAVERTON, OR 97008			A BEAVERTON, OR 97008 71			
FEI Number: 75-2930009 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:	Name and A	Address of Ne	ew Registered Agent:	
CORPORATION SERVICE CO. 1201 HAYS STREET TALLAHASSEE, FL 32301 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						
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEOD () LEVIN, IRVING 12737 SW IRO PORTLAND, OF	N MTN BLVD	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	V () BURROWS, CH 9020 NW BENS PORTLAND, OF	SON ST		SVP (X) O BURROWS, CHA 9020 NW BENSO PORTLAND, OR	DN ST	
Title: Name: Address: City-St-Zip:	WHITE, JOHN \ 19496 OLSON		Address:	SVP (X) (WHITE, JOHN W 19496 OLSON A LAKE OSWEGO,	VENUE	
Title: Name: Address: City-St-Zip:	V () ENNEKING, BR 7220 SW CEDA PORTLAND, OF	AR LANE		SVP (X) (ENNEKING, BRIA 7220 SW CEDAR PORTLAND, OR	RLANE	
Title: Name: Address: City-St-Zip:	V () FULLER, VERN 23811 STONEH SHERWOOD, C	IAVEN	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	V () ROBINSON, DA 5710 SW HAMI PORTLAND, OF	LTON STREET	Name: Address:	V (X) (ROBINSON, DAV 20448 MARIMAR BEAVERTON, OF	STREET	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN W. WHITE SVP 01/30/2006