

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003848

FILED
Feb 21, 2012
Secretary of State

Entity Name: GENESIS FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

8405 SW NIMBUS AVE
SUITE A
BEAVERTON, OR 97008 US

New Principal Place of Business:

Current Mailing Address:

8405 SW NIMBUS AVE
SUITE A
BEAVERTON, OR 97008 US

New Mailing Address:

FEI Number: 75-2930009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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: CH/D
Name: LEVIN, IRVING J
Address: 12737 SW IRON MTN BLVD
City-St-Zip: PORTLAND, OR 972198307 US

Title: COO
Name: MOORE, PATRICK J
Address: 8405 SW NIMBUS AVE., STE A
City-St-Zip: BEAVERTON, OR 97008 US

Title: PR/D
Name: WEINSTEIN, BRUCE A
Address: 1025 NW COUCH ST, UNIT 912
City-St-Zip: PORTLAND, OR 97209 US

Title: TREA
Name: ATKINSON, GREGG
Address: 8405 SW NIMBUS AVE, STE A
City-St-Zip: BEAVERTON, O 97008 US

Title: SVP
Name: FULLER, VERNON O
Address: 8405 SW NIMBUS AVE, STE A
City-St-Zip: BEAVERTON, OR 97008 US

Title: S
Name: ROWE, ROBERT C
Address: 8405 SW NIMBUS AVENUE, STE A
City-St-Zip: BEAVERTON, OR 97008 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: BRUCE A WEINSTEIN

PRES

02/21/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date