## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000004164

Entity Name: PROCTOR FINANCIAL, INC.

FILED Apr 27, 2012 Secretary of State

| Current Principal Place of Business: New P | rincipal Place of Business: |
|--|-----------------------------|
|--|-----------------------------|

200 KIRTS BLVD, SUITE 100 TROY, MI 48084

Current Mailing Address: New Mailing Address:

200 KIRTS BLVD, SUITE 100 TROY, MI 48084

FEI Number: 38-1457868 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

## **OFFICERS AND DIRECTORS:**

Title: [

Name: MASTERS, KENNETH R

Address: 681 S PARKER STREET, SUITE 300

City-St-Zip: ORANGE, CA 92868

Title: VS

Name: GRAMMIG, LAUREL L

Address: 3101 W DR MARTIN LUTHER KING JR, #400

City-St-Zip: TAMPA, FL 33607

Title: F

Name: GLANTZ, PAUL A

Address: 200 KIRTS BLVD, SUITE 100

City-St-Zip: TROY, MI 48084

Title: 7

Name: PORTO, RACHEL
Address: 30A VREELAND RD

City-St-Zip: FLORHAM PARK, NJ 07932

Title:

 Name:
 ELEWA, MOHAMED

 Address:
 200 KIRTS BLVD, SUITE 100

 City-St-Zip:
 TROY, MI 48084 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: LAUREL L GRAMMIG VS 04/27/2012