2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003187

FILED Jan 16, 2009 Secretary of State

Entity Na	ame: SYSTEM	S MANAGEMENT PLANNING	S, INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
75 GOODWAY DRIVE SUITE 2 ROCHESTER, NY 14623				75 GOODWAY DRIVE ROCHESTER, NY 14623		
Current Mailing Address:			New Mailir	New Mailing Address:		
75 GOODWAY DRIVE SUITE 2 ROCHESTER, NY 14623				75 GOODWAY DRIVE ROCHESTER, NY 14623		
FEI Numbe	er: 16-1545953	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name an	d Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	A, LYNNE RIDGEGLADE L L 33547 US					
	re named entity te te of Florida.	submits this statement for the	purpose of changing it	s registered	office or registered agent, or both,	
SIGNATU	JRE:					
	Electror	nic Signature of Registered Ag	gent	Date		
Election Ca	ampaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address:	RORAPAUGH,	Delete ERIC B CEO DRIVE, SUITE 2	Title: Name: Address:	COO (X RORAPAUGH 75 GOODWAY	•	

75 GOODWAY DRIVE, SUITE 2 Address: City-St-Zip: ROCHESTER, NY 14623

Title: () Delete CRIST, DAN CFO Name:

Address: 75 GOODWAY DRIVE, SUITE 2 ROCHESTER, NY 14623 City-St-Zip:

Title: () Delete

Name: Address: City-St-Zip:

City-St-Zip: ROCHESTER, NY 14623 Title: (X) Change () Addition CRIST, DAN CFO Name:

Address: 75 GOODWAY DRIVE ROCHESTER, NY 14623 City-St-Zip:

Title: () Change (X) Addition Name: RORAPAUGH, KRISTIN CEO 75 GOODWAY DRIVE Address: City-St-Zip: ROCHESTER, NY 14623

I hereby certify that the information supplied with this filing does not qualify 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: DAN CRIST **CFO** 01/16/2009