

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112152

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** PLANSOURCE FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

111 W JEFFERSON ST  
SUITE 100  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

111 W JEFFERSON ST  
SUITE 100  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 59-3707284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STREUFERT, SHANE  
111 W JEFFERSON STREET  
SUITE 100  
ORLANDO, FL 32801 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: SEC  
Name: ROBBINSON, WILLIAM H JR  
Address: 111 W JEFFERSON STREET STE 100  
City-St-Zip: ORLANDO, FL 32801

Title: CEO  
Name: WILLIAMS, DAYNE  
Address: 111 W JEFFERSON ST STE 100  
City-St-Zip: ORLANDO, FL 32801

Title: EVP  
Name: GOIN, BRUCE  
Address: 111 W JEFFERSON ST STE 100  
City-St-Zip: ORLANDO, FL 32801

Title: CFO  
Name: STREUFERT, SHANE  
Address: 111 W. JEFFERSON ST., SUITE 100  
City-St-Zip: ORLANDO, FL 32801

Title: PRES  
Name: CARVER, SCOTT  
Address: 111 W. JEFFERSON ST., SUITE 100  
City-St-Zip: ORLANDO, FL 32801

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 GOIN

EVP

04/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date