

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86626

FILED  
Apr 11, 2011  
Secretary of State

**Entity Name:** CAPITAL RETIREMENT PLAN SERVICES, INC.

**Current Principal Place of Business:**

822 A1A N., STE 211  
PONTE VEDRA BCH, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2349  
PONTE VEDRA, FL 320042349 US

**New Mailing Address:**

**FEI Number:** 59-3092339

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WERNER, TIM  
822 A1A N., STE 211  
PONTE VEDRA BCH, FL 32082 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: D  
Name: FAJANS, ROBERT G  
Address: 822 A1A N., STE 211  
City-St-Zip: PONTE VEDRA BCH, FL 32082 US

Title: P  
Name: WERNER, TIMOTHY G  
Address: 822 A1A N., STE 211  
City-St-Zip: PONTE VEDRA BCH, FL 32082 US

Title: VP  
Name: SWAIN, PATRICIA F  
Address: 822 A1A N., STE 211  
City-St-Zip: PONTE VEDRA BCH, FL 32082 US

Title: VP  
Name: SWAIN, JOHN R  
Address: 822 A1A N., STE 211  
City-St-Zip: PONTE VEDRA BCH, FL 32082 US

Title: VP  
Name: WERNER, SUZANNE F  
Address: 822 A1A N., STE 211  
City-St-Zip: PONTE VEDRA BCH, FL 32082 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: TIM WERNER

P

04/11/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date