

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112152

Entity Name: PLANSOURCE FINANCIAL SERVICES, INC.**Current Principal Place of Business:**101 S. GARLAND AVE
SUITE 203
ORLANDO, FL 32801**Current Mailing Address:**101 S. GARLAND AVE
SUITE 203
ORLANDO, FL 32801 US**FEI Number: 59-3707284****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title	DIRECTOR, VP
Name	WILSON, JEFFREY R.
Address	5 EMBARCADERO CTR. 20TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94111

Title	TREASURER
Name	WHINERY, JOY
Address	104 S. GARLAND AVENUE, SUITE 203
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR
Name	FOSNAUGH, MICHAEL E.
Address	101 S. GARLAND AVE SUITE 203
City-State-Zip:	ORLANDO FL 32801

Title	SECRETARY, COO
Name	BARNARD, PATRICIA
Address	101 S. GARLAND AVE SUITE 203
City-State-Zip:	ORLANDO FL 32801

Title	PRESIDENT, CEO
Name	SIGNORELLO, THOMAS
Address	104 S. GARLAND AVE SUITE 203
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR
Name	SIGNORELLO, TOM
Address	101 S. GARLAND AVE SUITE 203
City-State-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: PATRICIA BARNARD**SECRETARY****02/02/2023**

Electronic Signature of Signing Officer/Director Detail

Date