

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004143

**Entity Name:** GOLDLEAF FINANCIAL, LTD., INC.

**Current Principal Place of Business:**

3246 E. HWY. 7 STE 150  
MONTEVIDEO, MN 56265

**Current Mailing Address:**

PO BOX 466  
MONTEVIDEO, MN 56265 US

**FEI Number: 41-1901717**

**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            PRESIDENT, DIRECTOR  
Name            ANDERSON, JACK  
Address        3246 E. HWY. 7 STE 150  
                  PO BOX 466  
City-State-Zip: MONTEVIDEO MN 56265

Title            SECRETARY, VP  
Name            RISA, BRENDA  
Address        3246 E. HWY. 7 STE 150  
                  PO BOX 466  
City-State-Zip: MONTEVIDEO MN 56265

Title            TREASURER  
Name            KAIHOI, RONALD  
Address        3246 E. HWY. 7 STE 150  
                  PO BOX 466  
City-State-Zip: MONTEVIDEO MN 56265

*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: JACK ANDERSON**

**PRESIDENT**

**01/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date