

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005944

FILED  
Mar 28, 2012  
Secretary of State

Entity Name: FIDELITY SOLUTIONS, INC.

**Current Principal Place of Business:**

64 N CLARK  
SULLIVAN, MO 63080

**New Principal Place of Business:**

**Current Mailing Address:**

64 N CLARK  
SULLIVAN, MO 63080

**New Mailing Address:**

FEI Number: 13-4324077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD  
Name: COLBERT, JOHN E  
Address: 64 N CLARK  
City-St-Zip: SULLIVAN, MO 63080

Title: VP  
Name: DAVIS, MICHAEL T  
Address: 64 N CLARK  
City-St-Zip: SULLIVAN, MO 63080

Title: SD  
Name: STOCK, SHELDON K  
Address: 10 S BROADWAY STE 2000  
City-St-Zip: ST LOUIS, MO 63102

Title: VP  
Name: BELL, JOHN D  
Address: 64 N CLARK  
City-St-Zip: SULLIVAN, MO 63080

Title: VP  
Name: BEIER, DAVID N  
Address: 64 N CLARK  
City-St-Zip: SULLIVAN, MO 63080

Title: VP  
Name: HEAD, MARK D  
Address: 64 NORTH CLARK  
City-St-Zip: SULLIVAN, MO 63080

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: JOHN D BELL

VP

03/28/2012

Electronic Signature of Signing Officer or Director

Date