

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002599

FILED
Apr 25, 2012
Secretary of State

Entity Name: SUN BINSWANGER FINANCE HOLDING CORP.

Current Principal Place of Business:

5200 TOWN CENTER CIRCLE SUITE 600
BOCA RATON, FL 33486

New Principal Place of Business:

5200 TOWN CENTER CIRCLE
SUITE 600
BOCA RATON, FL 33486 US

Current Mailing Address:

5200 TOWN CENTER CIRCLE SUITE 600
BOCA RATON, FL 33486

New Mailing Address:

5200 TOWN CENTER CIRCLE
SUITE 600
BOCA RATON, FL 33486 US

FEI Number: 45-2545045

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: DVP
Name: MCCONVERY, MICHAEL J DVP
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 US

Title: AS
Name: MCCONVERY, MICHAEL J AS
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 US

Title: DVP
Name: KLAFTER, MELISSA DVP
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 US

Title: VT
Name: KLAFTER, MELISSA VT
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP
Name: MEZZANOTTE, JR, DAVID A VP
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP
Name: NEIMARK, JASON H VP
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486 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: LAURA LOUIS

POA

04/25/2012

Electronic Signature of Signing Officer or Director

Date