

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002755

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** ALLEGIANT MANAGEMENT SERVICES CORP

**Current Principal Place of Business:**

11838 BERNARDO PLAZA COURT SUITE 240  
SAN DIEGO, CA 92128

**New Principal Place of Business:**

**Current Mailing Address:**

11838 BERNARDO PLAZA COURT SUITE 240  
SAN DIEGO, CA 92128

**New Mailing Address:**

**FEI Number:** 27-3141105

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC  
515 EASTPARK AVE  
TALLAHASSEE, FL 32301 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: PVPS  
Name: BONAR, COLIN  
Address: 11838 BERNARDO PLAZA COURT SUITE 240  
City-St-Zip: SAN DIEGO, CA 92128

Title: TD  
Name: BONAR, COLIN  
Address: 11838 BERNARDO PLAZA COURT SUITE 240  
City-St-Zip: SAN DIEGO, CA 92128

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: WILLIAM SULLIVAN

COMP

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date