## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G18113

Entity Name: E-W-M REFERRAL SERVICES, INC.

FILED Apr 17, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

666 GRAND AVENUE 12751 S. DIXIE HIGHWAY
DES MOINES, IA 50309 CORAL GABLES, FL 33156

Current Mailing Address: New Mailing Address:

P.O. BOX 657 12751 S. DIXIE HIGHWAY DES MOINES, IA 50309 CORAL GABLES, FL 33156

FEI Number: 59-2380937 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

## **OFFICERS AND DIRECTORS:**

Title: P.D

Name: SHUFFIELD, RONALD A.

Address: 355 ALHAMBRA CIRCLE, SUITE 95-City-St-Zip: CORAL GABLES, FL 33134

Title: AS

Name: LEIGHTON, PAUL J.
Address: 666 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50309

Title: D

Name: MOLINE, ROBERT R

Address: 333 SOUTH 7TH STREET, SUITE 2700

City-St-Zip: MINNEAPOLIS, MN 55402

Title: D

Name: PELTIER, RONALD J

Address: 333 SOUTH 7TH ST., SUITE 2700 City-St-Zip: MINNEAPOLIS, MN 55402

Title: S

 Name:
 STRANDMO, DANA D

 Address:
 333 SOUTH 7TH ST., #2700

 City-St-Zip:
 MINNEAPOLIS, MN 55402

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: PAUL J. LEIGHTON AS 04/17/2012