

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000101868

**Entity Name:** VALIDITY SOLUTIONS, INC.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

801 INTERNATIONAL PKWY  
5TH FLOOR  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

801 INTERNATIONAL PKWY  
5TH FLOOR  
LAKE MARY, FL 32746

**New Mailing Address:**

**FEI Number:** 27-4493984

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARIANNE COULTON, P.A.  
2500 QUANTUM LAKES DRIVE  
SUITE 203  
BOYNTON BEACH, FL 33426 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: PTS  
Name: BELL, TOMEKA  
Address: 445 CRUZ BAY CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

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: TOMEKA BELL

PTS

02/09/2012

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

\_\_\_\_\_  
Date