

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000005712

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Entity Name:** BALSIZER FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

10911 BONITA BCH RD  
2031  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 829  
BONITA SPRINGS, FL 34133 US

**New Mailing Address:**

**FEI Number:** 59-3414974

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BALSIZER, REYNOLD PRES  
10411 BONITA BCH RD STE 2031  
BONITA SPRINGS, FL 34135 US

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

BALSIZER, REYNOLD PRES  
10411 BONITA BCH RD  
STE 2031  
BONITA SPRINGS, FL 34135 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

02/16/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BALSIZER, REYNOLD  
Address: 10911 BONITA BCH RD STE 2031  
City-St-Zip: BONITA SPRINGS, FL 34135

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: REYNOLD L BALSIZER

PRES

02/16/2012

Electronic Signature of Signing Officer or Director

Date