

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V60490

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** PENSION DATA RESOURCES, INC.

**Current Principal Place of Business:**

2 ADALIA  
# 401  
TAMPA, FL 33606

**New Principal Place of Business:**

2 ADALIA  
SUITE 401  
TAMPA, FL 33606

**Current Mailing Address:**

POST OFFICE BOX 802  
TAMPA, FL 33601

**New Mailing Address:**

**FEI Number:** 65-0355621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SARCONI, FRANCES E  
4423 CARROLLWOOD VILLAGE DR.  
TAMPA, FL 33618 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: D  
Name: SARCONI, SAM  
Address: 2 ADALIA #401  
City-St-Zip: TAMPA, FL 33606

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: SAM SARCONI

P

04/15/2012

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

\_\_\_\_\_  
Date