

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006612

Entity Name: SAGEPOINT FINANCIAL, INC.**Current Principal Place of Business:**2800 NORTH CENTRAL AVENUE
SUITE 2100
PHOENIX, AZ 85004**Current Mailing Address:**2800 NORTH CENTRAL AVENUE
SUITE 2100
PHOENIX, AZ 85004 US**FEI Number:** 20-1741754**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title	DIRECTOR
Name	AULD, JEFFREY M
Address	2800 NORTH CENTRAL AVENUE, SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

Title	TREASURER
Name	FIELDS, I SIMMONE
Address	2800 NORTH CENTRAL AVENUE SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

Title	DIRECTOR
Name	MURPHY, JEROME
Address	2800 NORTH CENTRAL AVENUE SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

Title	SECRETARY
Name	SORKIN, NOAH D.
Address	2800 NORTH CENTRAL AVENUE SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

Title	DIRECTOR, CHAIRMAN
Name	BROWN, VALERIE
Address	2800 NORTH CENTRAL AVENUE SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

Title	DIRECTOR, COO, VP
Name	SCHLUETER, MATTHEW
Address	2800 NORTH CENTRAL AVENUE SUITE 2100
City-State-Zip:	PHOENIX AZ 85004

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: NOAH D. SORKIN**SECRETARY****04/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date