

1.) CORPORATION NAME: SymMetric Revenue Solutions, Inc.	DUE DATE: 10/31/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802	SCC ID NO: F1507310				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>50,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	50,000
CLASS	AUTHORIZED				
COMMON	50,000				
4.) STATE OR COUNTRY OF INCORPORATION: FL					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4350 Fowler Street, Suite 15

CITY/ST/ZIP: Ft. Myers, FL 33901

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN R FRALEY TITLE: PRESIDENT ADDRESS: 4350 FOWLER STREET, SUITE 15 CITY/ST/ZIP/CO: FT. MYERS, FL 33901		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RANDY N HOWELL TITLE: TREASURER ADDRESS: 4075 COPPER RIDGE DRIVE CITY/ST/ZIP/CO: TRAVERSE CITY, MI 49684		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID A THOMPSON, MD TITLE: CCO ADDRESS: 4075 COPPER RIDGE DRIVE CITY/ST/ZIP/CO: TRAVERSE CITY, MI 49684		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARK A BURNHEIMER, ESQ TITLE: SECRETARY ADDRESS: 4110 COPPER RIDGE DRIVE, SUITE 204 CITY/ST/ZIP/CO: TRAVERSE CITY, MI 49684		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DERIK K KING, MD TITLE: VICE PRESIDENT ADDRESS: 4075 COPPER RIDGE DRIVE CITY/ST/ZIP/CO: TRAVERSE CITY, MI 49684		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARK A BURNHEIMER, ESQ	MARK A BURNHEIMER, ESQ,	10/22/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.