

1.) CORPORATION NAME:

SymMetric Revenue Solutions, Inc.

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1507310**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

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.

NAME:	JOHN R FRALEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	4350 FOWLER STREET, SUITE 15		
CITY/ST/ZIP/CO:	FT. MYERS, FL 33901		
NAME:	DERIK K KING, MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	4075 COPPER RIDGE DRIVE		
CITY/ST/ZIP/CO:	TRAVERSE CITY, MI 49684		
NAME:	RANDY N HOWELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	4075 COPPER RIDGE DRIVE		
CITY/ST/ZIP/CO:	TRAVERSE CITY, MI 49684		
NAME:	MARK A BURNHEIMER, ESQ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4110 COPPER RIDGE DRIVE, SUITE 204		
CITY/ST/ZIP/CO:	TRAVERSE CITY, MI 49684		
NAME:	DAVID A THOMPSON, MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CCO		
ADDRESS:	4075 COPPER RIDGE DRIVE		
CITY/ST/ZIP/CO:	TRAVERSE CITY, MI 49684		
NAME:	CHRISTOPHER J RICHTER, MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
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/ JOHN R FRALEY	JOHN R FRALEY, PRESIDENT	10/10/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.		