

1.) CORPORATION NAME:

**Money Management International, Inc.**

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F1536541**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**GLEN ALLEN, VA 23060-6802**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 14141 SOUTHWEST FREEWAY STE 1000

CITY/ST/ZIP: SUGAR LAND, TX 77478

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:	IVAN L HAND, JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIRECTOR		
ADDRESS:	14141 SOUTHWEST FREEWAY STE 1000		
CITY/ST/ZIP/CO:	SUGAR LAND, TX 77478		

NAME:	DAVID A JUENGEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/TREASURER		
ADDRESS:	14141 SOUTHWEST FREEWAY STE 1000		
CITY/ST/ZIP/CO:	SUGAR LAND, TX 77478		

NAME:	JEAN L LAW	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	14141 SOUTHWEST FREEWAY STE 1000		
CITY/ST/ZIP/CO:	SUGAR LAND, TX 77478		

NAME:	LESTER E DEES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8440 BLUEBONNET BLVD, STE A		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70810		

NAME:	FRANK DEGISE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	DELL PEROT SYSTEMS		
CITY/ST/ZIP/CO:	500 EXCHANGE ST ATTN: COOKSON 2ND FL PROVIDENCE, RI 02903		

NAME:	DOUG DURNIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11955 AIRLINE HIGHWAY		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70817		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN MCNEELY DIRECTOR 1235 SOUTH OAKLAND AVE. PASADENA, CA 91106	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM STAATS DIRECTOR 7854 ANSELMO LANE BATON ROUGE, LA 70810	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH WARNER DIRECTOR 9414 WOODLAND DR. SILVER SPRING, MD 20910	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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/ JEAN L LAW	JEAN L LAW, SECRETARY	12/17/2012	
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.			