

1.) CORPORATION NAME: Proctor Financial, Inc.	DUE DATE: 5/31/2012								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802	SCC ID NO: F1586710								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION								
4.) STATE OR COUNTRY OF INCORPORATION: MI	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>PREFER</td> <td>20,000</td> </tr> <tr> <td>COMA</td> <td>1,000</td> </tr> <tr> <td>COMB</td> <td>30,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	PREFER	20,000	COMA	1,000	COMB	30,000
CLASS	AUTHORIZED								
PREFER	20,000								
COMA	1,000								
COMB	30,000								

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5225 CROOKS RD

CITY/ST/ZIP: TROY, MI 48098

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: PAUL A GLANTZ TITLE: PRESIDENT ADDRESS: 5225 CROOKS RD CITY/ST/ZIP/CO: TROY, MI 48098	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: LAUREL L GRAMMIG TITLE: VP/S ADDRESS: 3101 W MLK JR BLVD STE 400 CITY/ST/ZIP/CO: TAMPA, FL 33607	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: MOHAMED ELEWA TITLE: VP-FINANCE ADDRESS: 5225 CROOKS RD CITY/ST/ZIP/CO: TROY, MI 48098	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: KENNETH R MASTERS TITLE: CHAIRMAN ADDRESS: 681 S PARKER ST STE 300 CITY/ST/ZIP/CO: ORANGE, CA 92868	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: RACHEL PORTO TITLE: TREASURER ADDRESS: 30A VREELAND R CITY/ST/ZIP/CO: FLORHAM PARK, NJ 07932	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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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/ LAUREL L GRAMMIG	LAUREL L GRAMMIG, VP/S	5/30/2012
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.