

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000003799

**FILED**  
**Mar 14, 2019**  
**Secretary of State**  
**0364742793CC**

**Entity Name:** PLANMEMBER SERVICES CORPORATION

**Current Principal Place of Business:**

6187 CARPINTERIA AVE  
CARPINTERIA, CA 93013

**Current Mailing Address:**

6187 CARPINTERIA AVE  
CARPINTERIA, CA 93013

**FEI Number:** 77-0309553

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           PRES  
Name           ZIEHL, JON  
Address        6187 CARPINTERIA AVE  
City-State-Zip: CARPINTERIA CA 93013

Title           VP  
Name           JANEWAY, TERRALL  
Address        6187 CARPINTERIA AVE  
City-State-Zip: CARPINTERIA CA 93013

Title           SEC  
Name           BOWMAN, BYRON  
Address        6187 CARPINTERIA AVE  
City-State-Zip: CARPINTERIA CA 93013

Title           TREA  
Name           KEMBLE, BILL  
Address        6187 CARPINTERIA AVE  
City-State-Zip: CARPINTERIA CA 93013

Title           DIR  
Name           ZIEHL, JON  
Address        6187 CARPINTERIA AVE  
City-State-Zip: CARPINTERIA CA 93013

*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:** BILL KEMBLE

**TREASURER**

**03/14/2019**

Electronic Signature of Signing Officer/Director Detail

Date