State	e of Rhode Island and Pro Office of the Secreta		ee: \$50.(			
Division Of Business Services 148 W. River Street Providence RI 02904-2615						
HOPE	(401) 222-30					
Foreign Business Corpo Annual Report Filing Period: January 1 - March						
	2-1501(e), each corporation failir ays after the time prescribed by I e of \$25.00.					
ANNUAL REPORT YEAR: 20	<u>17</u>					
1. Corporate ID No. <u>000</u>	<u>108261</u>					
2. Name of Corporation $\underline{We}$	endover Financial Services Cor	poration				
3. Street Address Principal B	usiness Office:					
No. and Street: 5400 LE	GACY DRIVE					
City or Town: PLANO		TX Zip: 75024 Country: US	SA			
5. State of Incorporation State: NC						
	ARTICLE III					
Using the following NAICS cod	les, please select the code that b	est describes your business.				
NAICS Code		<u>6</u> <u>81</u>				
6. Brief Description of the Cl	naracter of Business Conducte	d in Rhode Island				
SALES & SERVICES						
7. Names and Addresses of t	he Officers and Directors:					
All officers and directors I	nust be listed.					
Title	Individual Name	Address				
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Co	ountry			
PRESIDENT	SUSAN M. O'DOHERTY	5400 LEGACY DRIVE PLANO, TX 75024 USA				
SECRETARY	GERALDINE M. MCGUCKIN	5400 LEGACY DRIVE PLANO, TX 75024 USA				

CEO	KEITH KASTEN	5400 LEGACY DRIVE
		PLANO, TX 75024 USA
TREASURER/CFO	HOLLY MAKOWSKI	5400 LEGACY DRIVE
		PLANO, TX 75024 USA
DIRECTOR	KEITH KASTEN	5400 LEGACY DRIVE
		PLANO, TX 75024 USA
DIRECTOR	SUSAN G. STARLING	5400 LEGACY DRIVE
		PLANO, TX 75024 USA
DIRECTOR	SUSAN M. O'DOHERTY	5400 LEGACY DRIVE
		PLANO, TX 75024 USA

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CWP		\$1.0000	1,000.00	1000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**Signed this 7 Day of March, 2017 at 8:22:50 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.* 

## By NATALIE PICKENS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

 $\ensuremath{\textcircled{\sc 0}}$  2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved