No. C 136121		Due no later than Oct 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MCKEE RISK MANAGEMENT, INC. JUDY VERNA 610 FREEDOM BUSINESS CENTER					
NO FILING FEE IF RECEIVED BY DUE DATE		SUITE 300 KING OF PRUSSIA PA 19406					
4. Corporations: Enter	Names and Busin	ess Addresses of Presi	ident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	CLYDE DAVI	D MCKEE III	610 FREEDOM BUSINESS CENTER SUITE 300	KING OF PRUSSIA	A PA	USA	19406
SECRETARY	JAMES R HI	ILKENE	610 FREEDOM BUSINESS CENTER SUITE 300	KING OF PRUSSIA	A PA	USA	19406
PRESIDENT	JEFFREY A	MILLER	610 FREEDOM BUSINESS CENTER SUITE 300	KING OF PRUSSIA	A PA	USA	19406
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
PA		Signature: James		Date: 08/25/2015			
C 136121		Name (type or prir	Title: Hilkene				
Processed 08/25/2015		* Electronically provided signatures are accepted as original signatures.					