

No. C 192933		Due no later than Nov 30, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		STS PROGRAM MANAGEMENT, INC. LISA GORNAY ONE BLUE HILL PLAZA SUITE 1686 PEARL RIVER NY 10965-6164					
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
DIRECTOR	ROBERT MCKEON	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
TREASURER	THOMAS DIMARINO	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
VICE PRESIDENT	DAVID PATERSON	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
PRESIDENT	THOMAS DIMARINO	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
DIRECTOR	CATHY MCKEON	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
DIRECTOR	DAVID PATERSON	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
SECRETARY	DAVID PATERSON	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
DIRECTOR	THOMAS DIMARINO	ONE BLUE HILL PLAZA SUITE 1686		PEARL RIVER	NY	USA	10965-6164
5. Organized Under the Laws of: NY C 192933		6. Annual Report must be signed.* Signature: Thomas DiMarino Name (type or print): Thomas DiMarino					
				Date: 10/17/2017		Title: President	
Processed 10/17/2017		* Electronically provided signatures are accepted as original signatures.					