

No. C 191122		Due no later than May 31, 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 1. Mailing Address: Correct in this box if needed. CBIZ BENEFITS & INSURANCE SERVICES, INC. MARTHA LANGE 6050 OAK TREE BLVD STE 500 CLEVELAND OH 44131		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				3. <u>New</u> Registered Agent Signature:*		
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	MATTHEW J MORELLI	6050 OAK TREE BLVD., SUITE 500	CLEVELAND	OH	USA	44131
SECRETARY	MICHAEL W GLEESPEN	6050 OAK TREE BLVD STE 500	CLEVELAND	OH	USA	44131
PRESIDENT	MICHAEL P KOUZELOS	6050 OAK TREE BLVD., SUITE 500	CLEVELAND	OH	USA	44131
5. Organized Under the Laws of: MO C 191122		6. Annual Report must be signed.* Signature: Michael W Gleespen Name (type or print): Michael W Gleespen Date: 04/07/2017 Title: Secretary				
Processed 04/07/2017		* Electronically provided signatures are accepted as original signatures.				