

No. C 194852		Due no later than May 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. POSITUDES, INC. % CORPORATION SERVICE COMPANY 12550 W EXPLORER DR SUITE 100 BOISE ID 83713		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713-3032			
NO FILING FEE IF RECEIVED BY DUE DATE				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	GLADYS LEE	2015 UPPERCAGE DR 4TH FL	ATLANTA	GA	USA	30322	
PRESIDENT	VINCENT FUSARO	188 LOINES AVE	MERRICK	NY	USA	11566-7022	
DIRECTOR	CAROL MADEIROS	102 TAYLOR CT	MAYFIELD	NY	USA	12117	
DIRECTOR	STEPHANIE GUSTAFSON	6655 TRAVIS SUITE 490	HOUSTON	TX	USA	77030-7022	
DIRECTOR	MARK A PLENCRER	820 4TH ST N	FARGO	ND	USA	58122-7022	
SECRETARY	SEAN SINGH	134 80TH ST	ST PETERSBURG	FL	USA	33702-7022	
DIRECTOR	JOE PUGLIESE	448 STONEMASON WAY	LANSDALE	PA	USA	19446-7022	
VICE PRESIDENT	MARYANN FUSARO	188 LOINES AVE	MERRICK	NY	USA	11566-7022	
DIRECTOR	KARYN DENTON	PUGET SOUND BLOOD CTR 921 TERRY AVE	SEATTLE	WA	USA	98104	
DIRECTOR	PAUL N LIMBERIS	13199 EAST MONTVIEW BLVD HEMOPHILIA & THROMBOSIS CTR	AURORA	CO	USA	80045	
5. Organized Under the Laws of: NY C 194852		6. Annual Report must be signed.* Signature: Maryann Fusaro Name (type or print): Maryann Fusaro					
		Date: 05/09/2016 Title: Vice President					
Processed 05/09/2016 * Electronically provided signatures are accepted as original signatures.							