

No. <b>C 183395</b>		Due no later than Jun 30, 2013		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> PENSION ADMINISTRATORS, INC. PAULA J KNOX 2505 MCCABE WY IRVINE CA 92614-6243		BUSINESS FILINGS INCORPORATED 921 S ORCHARD ST STE G BOISE ID 83705 USA		
				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	STEVEN H. COURSE	2505 MC CABE WAY	IRVINE	CA	USA	92614
DIRECTOR	LAURIE L. LEE	2505 MC CABE WAY	IRVINE	CA	USA	92614
DIRECTOR	DONALD R. LAWRENZ	2505 MC CABE WAY	IRVINE	CA	USA	92614-6243
TREASURER	PAULA J. KNOX	2505 MC CABE WAY	IRVINE	CA	USA	92614-6243
PRESIDENT	DONALD R. LAWRENZ	2505 MCCABE WY	IRVINE	CA	USA	92614-6243
5. Organized Under the Laws of:  <b>DE C 183395</b>		6. Annual Report must be signed.* Signature: Paula J. Knox Name (type or print): Paula J. Knox Date: 05/10/2013 Title: Treasurer				
Processed 05/10/2013		* Electronically provided signatures are accepted as original signatures.				