

No. C 113412		Due no later than Jan 31, 2008		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. FRINGE BENEFITS MANAGEMENT COMPANY FLORRIE JONES PO BOX 1878 TALLAHASSEE FL 32302-1878 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DRIVE STE 2 BOISE ID 83702		
				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
TREASURER	DEBRA TOUGAS	PO BOX 1878	TALLAHASSEE	FL	USA	32302-1878
PRESIDENT	LORRAINE M STRICKLAND	3101 SESSIONS ROAD P. O. BOX 1878	TALLAHASSEE	FL	USA	32303
SECRETARY	PATRICIA NEELY	3101 SESSIONS ROAD P. O. BOX 1878	TALLAHASSEE	FL	USA	32303
DIRECTOR	MICHAEL H SHERIDAN	3101 SESSIONS ROAD P. O. BOX 1878	TALLAHASSEE	FL	USA	32303
5. Organized Under the Laws of: FL C 113412		6. Annual Report must be signed.* Signature: Florrie JONES Name (type or print): Florrie JONES Date: 12/13/2007 Title: Compliance Specialist				
Processed 12/13/2007		* Electronically provided signatures are accepted as original signatures.				