

No. <b>C 192933</b>	<b>Due no later than Nov 30, 2016</b> <b>Annual Report Form</b>		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>		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705			
	STS PROGRAM MANAGEMENT, INC. LISA GORNAY ONE BLUE HILL PLAZA SUITE 1686 PEARL RIVER NY 10965-6164		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	DAVID PATERSON	ONE BLUE HILL PLAZA	PEARL RIVER	NY	USA	10965-6164
SECRETARY	DAVID PATERSON	ONE BLUE HILL PLAZA	PEARL RIVER	NY	USA	10965-6164
DIRECTOR	THOMAS DIMARINO	ONE BLUE HILL PLAZA SUITE 1686	PEARL RIVER	NY	USA	10965-6164
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
5. Organized Under the Laws of:  <b>NY</b> <b>C 192933</b>		6. Annual Report must be signed.* Signature: Thomas DiMarino Name (type or print): Thomas DiMarino Date: 10/20/2016 Title: President				
Processed 10/20/2016		* Electronically provided signatures are accepted as original signatures.				