No. C 151475 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Oct 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. ALLEGIANCE BENEFIT PLAN MANAGEMENT, INC. MICHELE VALENTINO 2806 S. GARFIELD ST. MISSOULA MT 59801 USA		Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705-0615 3. New Registered Agent Signature:*											
								1. Corporations: Enter Na	mes and Busin	ess Addresses of Presi	dent, Secretary, and Directors. Treasure	(optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	LINDSAY TEGROEN		11016 RUSHMORE DR SUITE 300	CHARLOTTE	NC	USA	28277								
PRESIDENT	RONALD K DEWSNUP		2806 SOUTH GARFIELD ST	MISSOULA	MT	USA	59801								
DIRECTOR	DIRK C VISSER		2806 SOUTH GARFIELD ST	MISSOULA	MT	USA	59801								
TREASURER	RICHARD K DANIELS		2806 SOUTH GARFIELD ST	MISSOULA	MT	USA	59801								
DIRECTOR	WILLIAM S JAMESON		400 N BRAND BOULEVARD	GLENDALE	CA	USA	91203								
SECRETARY	ARY ANNA KRISHTUL		1601 CHESTNUT ST TL160	PHILADELPHIA	PA	USA	19192								
DIRECTOR	JACQUELYN A AUBE		900 COTTAGE GROVE RD	BLOOMFIELD	CT	USA	06002								
DIRECTOR	SHEILA MCGINLEY-GRAZIOSI		900 COTTAGE GROVE RD WILDE	BLOOMFIELD	CT	USA	06152								
DIRECTOR	CHRISTOPHE	ER DEROSA	26 EXECUTIVE PARK	IRVINE	CA	USA	92614								
5. Organized Under the Laws of:		6. Annual Report must be signed.*													
MT		Signature: Ronald K Dewsnup			Date: 08/21/2018										
C 151475		Name (type or print): Ronald K Dewsnup			Title: President										
Processed 08/21/2018		* Electronically provid	ed signatures are accepted as original sig	ınatures.											