

No. C 103593	Due no later than Oct 31, 2014 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. NATIONAL COUNCIL ON COMPENSATION INSURANCE, INC. KAREN JONES 901 PENINSULA CORPORATE CIRCLE BOCA RATON FL 33487-1362 USA		CORPORATE CREATIONS NETWORK IN 950 W BANNOCK ST #1100 BOISE 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
DIRECTOR	CHERYL L BUDD	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
DIRECTOR	ELIZABETH B KITCHENS	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
PRESIDENT	STEPHEN J KLINGEL	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
SECRETARY	TERRENCE D DELEHANTY	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
TREASURER	ALFREDO T GUERRA	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
DIRECTOR	HELEN J WESTERVELT	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
DIRECTOR	MARK MILEUSNIC	901 PENINSULA CORPORATE CIRCLE	BOCA RATON	FL	USA	33487-1362
5. Organized Under the Laws of: DE C 103593		6. Annual Report must be signed.* Signature: Terrence D. Delehanty Name (type or print): Terrence D. Delehanty Date: 10/29/2014 Title: Secretary				
Processed 10/29/2014		* Electronically provided signatures are accepted as original signatures.				