

No. <b>W 23219</b>		<b>Due no later than Mar 31, 2010</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  OPTION CARD, LLC CORNERSTONE SUP CORNERSTONE SUPPORT 11111 HOUZE ROAD SUITE 200 ROSWELL GA 30076		LEXISNEXIS DOCUMENT SOLUTION 1401 SHORELINE DRIVE BOISE ID 83702	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	GARY STERN	210 SYLVAN AVE.	ENGLEWOOD	NJ	USA 07632
5. Organized Under the Laws of:  <b>CO W 23219</b>		6. Annual Report must be signed.* Signature: Denise Robbins Name (type or print): Denise Robbins Date: 01/26/2010 Title: Licensing Specialist			
Processed 01/26/2010		* Electronically provided signatures are accepted as original signatures.			