

No. C 151475	Due no later than Oct 31, 2015 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.		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
	ALLEGIANCE BENEFIT PLAN MANAGEMENT, INC. ROGER COWAN 2806 S. GARFIELD ST. MISSOULA MT 59801 USA		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
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	ANNA KRISHTUL	1601 CHESTNUT ST TL160	PHILADELPHIA	PA	USA	19192
DIRECTOR	JACQUELYN A AUBE	900 COTTAGE GROVE RD	BLOOMFIELD	CT	USA	06002
DIRECTOR	MICHAEL W TRIPLET	901 E CARY ST, SUITE 2000	RICHMOND	VA	USA	23219
DIRECTOR	DINESH GANESAN	900 COTTAGE GROVE RD WILDE, W3FIN	BLOOMFIELD	CT	USA	06152
5. Organized Under the Laws of: MT C 151475	6. Annual Report must be signed.* Signature: Ronald K Dewsnup Name (type or print): Ronald K Dewsnup		Date: 09/08/2015 Title: President			
Processed 09/08/2015		* Electronically provided signatures are accepted as original signatures.				