

No. <b>C 194907</b>		<b>Due no later than Jun 30, 2014</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>  HEALTHPLAN SERVICES, INC. JEFF BELL 3501 FRONTAGE RD TAMPA FL 33607		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 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	
DIRECTOR	STEPHEN M SAFT	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
DIRECTOR	ARTHUR T SCHULTZ	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
DIRECTOR	JEFFERY W BAK	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
VICE PRESIDENT	BARBARA J MATHEY	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
TREASURER	STEPHEN M SAFT	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
PRESIDENT	JEFFERY W BAK	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
SECRETARY	KAREN MULROE	3501 FRONTAGE RD	TAMPA	FL	USA	33607	
5. Organized Under the Laws of:  <b>FL</b> <b>C 194907</b>		6. Annual Report must be signed.*  Signature: Jeffery W. Bak Name (type or print): Jeffery W. Bak					
		Date: 04/17/2014 Title: President					
Processed 04/17/2014 * Electronically provided signatures are accepted as original signatures.							